

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000143111

Entity Name: XTERIOR CARE PROFESSIONALS, LLC

Current Principal Place of Business:

6717 BEATRIX DRIVE
JACKSONVILLE, FL 32226

Current Mailing Address:

6717 BEATRIX DR
JACKSONVILLE , FL 32226 US

FEI Number: 81-3587943

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ELIAN, DANIEL
6717 BEATRIX DRIVE
JACKSONVILLE, FL 32226 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DANIEL ELIAN

04/04/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name ELIAN, DANIEL
Address 6717 BEATRIX DRIVE
City-State-Zip: JACKSONVILLE FL 32226

Title MGR
Name ELIAN, DANIEL
Address 6717 BEATRIX DRIVE
City-State-Zip: JACKSONVILLE FL 32226

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DANIEL ELIAN

MGR

04/04/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date