

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000153091

**Entity Name:** COMPLETE A/C SOLUTIONS L.L.C.

**Current Principal Place of Business:**

4 SEASIDE CT  
PALM COAST, FL 32164

**Current Mailing Address:**

4 SEASIDE CT  
PALM COAST, FL 32164 US

**FEI Number: 81-3589118**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

RAMNARINE SINGH, SHAWN R  
4 SEASIDE CT  
PALM COAST, FL 32164 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	RAMNARINE SINGH, SHAWN R	Name	RAMNARINE SINGH, REBECCA ANN
Address	4 SEASIDE CT	Address	4 SEASIDE CT
City-State-Zip:	PALM COAST FL 32164	City-State-Zip:	PALM COAST FL 32164

*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: SHAWN RAMNARINE SINGH**

**MGR**

**03/12/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date