

2022 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L16000176214

Entity Name: 1ST SERVICES, LLC

Current Principal Place of Business:

86115 GRAHAM CT.
YULEE, FL 32097

Current Mailing Address:

13240 PACEMAKER DR.
JACKSONVILLE, FL 32225 US

FEI Number: 82-1358181

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

IRWIN POLK, NELLIE MARCUS K
13240 PACEMAKER DR.
JACKSONVILLE, FL 32225 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: NELLIE MARCUS IRWIN POLK

05/19/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title: MANAGER
Name: IRWIN, NELLIE K
Address: 13240 PACEMAKER DR.
City-State-Zip: JACKSONVILLE FL 32225

Title: AUTHORIZED MEMBER
Name: IRWIN, ROBERT STEVEN
Address: 86115 GRAHAM CT.
City-State-Zip: YULEE FL 32097

Title: AUTHORIZED MEMBER
Name: IRWIN, ROBERT JASON
Address: 86115 GRAHAM CT.
City-State-Zip: YULEE FL 32097

Title: AUTHORIZED MEMBER
Name: PORTWOOD, KIETH
Address: 86115 GRAHAM CT.
City-State-Zip: YULEE FL 32097

Title: TREASURER
Name: POLK, MARCUS
Address: 2223 SE 6TH ST
City-State-Zip: POMPANO BEACH FL 33062

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: NELLIE MARCUS IRWIN POLK

MANAGER

05/19/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date