LAKE PLACID,	FL 33852				
Current Mai	ling Address:				
129 ALDERN LAKE PLACI	MAN DR. ID, FL 33852 US				
FEI Number: 81-5380371 Certificate of Status			Certificate of Status Des	ired: No	
Name and A	Name and Address of Current Registered Agent:				
TROWSKI, KEV 129 ALDERMAN	N DR.				
LAKE PLACID,	FL 33852 US				
	FL 33852 US I entity submits this statement for the purpose of changing its regi	istered office or regis	tered agent, or both, in the State of Fl	orida.	
The above named		istered office or regis	tered agent, or both, in the State of Fl	orida. 04/19/2022	
The above named	l entity submits this statement for the purpose of changing its reg	istered office or regis	tered agent, or both, in the State of Fl		
The above named SIGNATURE	entity submits this statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of the statement for the purpose of the statement for the purpose of the purpose of the statement for the purpose of the purpose of the statement for the purpose of the statement for the purpose of the purpose of the purpose of the statement for the purpose of the purpose	istered office or regis	tered agent, or both, in the State of Fl	04/19/2022	
The above named SIGNATURE	entity submits this statement for the purpose of changing its registered KEVIN O. TROWSKI Electronic Signature of Registered Agent	istered office or regis	tered agent, or both, in the State of Fl	04/19/2022	
The above named SIGNATURE Authorized	entity submits this statement for the purpose of changing its regiser E: KEVIN O. TROWSKI Electronic Signature of Registered Agent Person(s) Detail :			04/19/2022 Date	
The above named SIGNATURE Authorized	entity submits this statement for the purpose of changing its registered Agent Electronic Signature of Registered Agent Person(s) Detail : AMBR	Title	AMBR	04/19/2022 Date	

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: CLEARWATER CONSTRUCTION GROUP, LLC

DOCUMENT# L17000031420

129 ALDERMAN DR.

Current Principal Place of Business:

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: KEVIN TROWSKI

MANAGING PARTNER 04/19/2022

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 19, 2022 Secretary of State 2365116560CC