

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000044896

Entity Name: FIELD SERVICE PROFESSIONALS, LLC.

Current Principal Place of Business:

3630 NW 85 WAY, STE. #101
SUNRISE, FL 33351

Current Mailing Address:

3630 NW 85 WAY, STE.#101
SUNRISE, FL 33351 US

FEI Number: 82-4505900

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSEN, DOUGLAS H
3630 NW 85 WAY, STE.#101
SUNRISE, FL 33351 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
Name ROSEN, DOUGLAS H
Address 3630 NW 85 WAY, STE. #101
City-State-Zip: SUNRISE FL 33351

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: DOUGLAS H ROSEN

MANAGER

03/10/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date