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: SERVILLE DOUGLAS Electronic Signature of Signing Authorized Person(s) Detail

JACK-DOUGLAS, ANN MARIE

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

Authorized Person(s) Detail :

Title MGR DOUGLAS. SERVILLE Name Address 1813 CITRUS ORCHARD WAY City-State-Zip: VALRICO FL 33594

MANAGER

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000069399

Entity Name: SERVILLE DOUGLAS AUTO BODY REPAIR LLC

Current Principal Place of Business:

1209 OLD HOPEWELL RD UNIT 19A TAMPA, FL 33619

Current Mailing Address:

1813 CITRUS ORCHARD WAY VALRICO, FL 33594

FEI Number: 82-4904826

Name and Address of Current Registered Agent:

1813 CITRUS ORCHARD WAY VALRICO, FL 33594 US

FILED Apr 30, 2021 Secretary of State 6640684225CC

Certificate of Status Desired: Yes

Date

04/30/2021 Date