

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000115410

Entity Name: BETH OFSEUR ADJUSTING LLC**Current Principal Place of Business:**5817 ANTIGUA DRIVE
PORT ORANGE, FL 32127**Current Mailing Address:**5817 ANTIGUA DRIVE
PORT ORANGE, FL 32127**FEI Number:** 83-0526800**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**OFSEUR, BETH
5817 ANTIGUA DRIVE
PORT ORANGE, FL 32127 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	AMBR
Name	OFSEUR, BETH
Address	5817 ANTIGUA DRIVE
City-State-Zip:	PORT ORANGE FL 32127

Title	AMBR
Name	OFSEUR, REID
Address	5817 ANTIGUA DRIVE
City-State-Zip:	PORT ORANGE FL 32127

Title	MGR
Name	OFSEUR, PIERCE
Address	165 PINE ST
City-State-Zip:	ATLANTIC BEACH FL 32233

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: BETH OFSEUR

OWNER

01/16/2021

Electronic Signature of Signing Authorized Person(s) Detail_____
Date