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: DONALD EVANS

Electronic Signature of Signing Authorized Person(s) Detail

Name and Address of Current Registered Agent:

EVANS, DONALD J

3207 W BAY VISTA AVENUE TAMPA, FL 33611 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

Authorized Person(s) Detail :

Title	MGR	Title	AMBR
Name	EVANS, DONALD J	Name	EVANS, SHEILA W
Address	3207 W BAY VISTA AVENUE	Address	8625 MAGNOLIA STREET
City-State-Zip:	TAMPA FL 33611	City-State-Zip:	GIBSONTON FL 33534

MGR

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L18000149785

Entity Name: ISLAND BREEZE POOL SERVICE, LLC

Current Principal Place of Business:

3207 W BAY VISTA AVENUE TAMPA, FL 33611

Current Mailing Address:

3207 W BAY VISTA AVENUE TAMPA, FL 33611 US

FEI Number: 83-0983337

Certificate of Status Desired: Yes

03/12/2024

Date

FILED Mar 12, 2024 Secretary of State 2053923391CC

Date