

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000267443

Entity Name: ALPHA OMEGA CERTIFICATION SERVICE LLC

Current Principal Place of Business:

5103 IVYBROOK LANE
LAKELAND, FL 33811

Current Mailing Address:

5103 IVYBROOK LANE
LAKELAND, FL 33811

FEI Number: 83-2590860

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEEKS, TRACY R
5103 IVYBROOK LANE
LAKELAND, FL 33811 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 DAVIS, STEPHEN T
Address 2741 HIGH RIDGE DRIVE
City-State-Zip: LAKELAND FL 33812

Title MGR
Name WEEKS, BRIAN D
Address 5103 IVYBROOK LANE
City-State-Zip: LAKELAND FL 33811

Title MGR
Name WEEKS, TRACY R
Address 5103 IVYBROOK LANE
City-State-Zip: LAKELAND FL 33811

Title MANAGER
Name BARKER, LAURA
Address 21420 LOCKHART RD
City-State-Zip: DADE CITY FL 33523

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: BRIAN WEEKS

MANAGER

03/17/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date