that my name appears above, or on an attachment with all other like empowered. 06/05/2020

Electronic Signature of Signing Authorized Person(s) Detail

FEI Number: 84-2592299 Name and Address of Current Registered Agent:

BJELAJAC, KRUNOSLAV 92 PRINCESS RUTH LANE PALM COAST, FL 32164 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	AMBR	Title	MGR
Name	WILLIS, WILLIAM	Name	BJELAJAC, KRUNOSLAV
Address	2484 WINCHESTER LANE	Address	92 PRINCESS RUTH LANE
City-State-Zip:	ST. AUGUSTINE FL 32092	City-State-Zip:	PALM COAST FL 32164

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

SIGNATURE: KRUNOSLAV BJELAJAC

MANAGER

FILED Jun 05, 2020 Secretary of State 2051388616CC

Certificate of Status Desired: No

Date

Date

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000196475

Entity Name: 4 SEASONS SERVICES LLC

Current Principal Place of Business:

92 PRINCESS RUTH LANE PALM COAST. FL 32164

Current Mailing Address:

92 PRINCESS RUTH LANE PALM COAST. FL 32164 US