

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000284510

Entity Name: AQUABLISS POOL CARE, LLC

Current Principal Place of Business:

561 BROOMSEDGE CIR
SAINT AUGUSTINE, FL 32095

Current Mailing Address:

561 BROOMSEDGE CIR
SAINT AUGUSTINE, FL 32095 US

FEI Number: 84-4665533

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAMPBELL, TODD R
561 BROOMSEDGE CIR
SAINT AUGUSTINE, FL 32095 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 AP
Name CAMPBELL, TODD R
Address 561 BROOMSEDGE CIR
City-State-Zip: SAINT AUGUSTINE FL 32095

Title AP
Name CAMPBELL, LAURA J
Address 561 BROOMSEDGE CIR
City-State-Zip: SAINT AUGUSTINE FL 32095

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: LAURA J CAMPBELL

OWNER/PRESIDENT

01/31/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date