

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000120336

**Entity Name:** SHAKEY JOE TREE TRIMMING & REMOVAL LLC

**Current Principal Place of Business:**

2645 SHAKEY JOE RD  
VERNON, FL 32462

**Current Mailing Address:**

2645 SHAKEY JOE RD  
VERNON, FL 32462

**FEI Number:** 85-0990966

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WEEKS, STEPHEN P  
2645 SHAKEY JOE RD  
VERNON, FL 32462 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            WEEKS, STEPHEN P  
Address        2645 SHAKEY JOE RD  
City-State-Zip: VERNON FL 32462

*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:** STEPHEN P WEEKS

AMBR

04/21/2022

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date