

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000125261

**Entity Name:** SEPTIC CONVERSION OF FLORIDA, LLC

**Current Principal Place of Business:**

12191 WEST LINEBAUGH AVENUE  
UNIT 756  
TAMPA, FL 33626

**FILED**  
**Apr 29, 2021**  
**Secretary of State**  
**1750518584CC**

**Current Mailing Address:**

12191 WEST LINEBAUGH AVENUE  
UNIT 756  
TAMPA, FL 33626 US

**FEI Number: 85-1348422**

**Certificate of Status Desired: No**

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

CORWIN, ADAM ESQ  
12191 WEST LINEBAUGH AVENUE  
UNIT 756  
TAMPA, FL 33626 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 KLARO SEPTIC LLC  
Address 12191 WEST LINEBAUGH AVENUE  
UNIT 756  
City-State-Zip: TAMPA FL 33626

Title AMBR  
Name LB SEPTIC LLC  
Address 13712 CHESTERSALL DRIVE  
City-State-Zip: TAMPA FL 33624

Title AMBR  
Name TSM SEPTIC LLC  
Address 2910 WEST NASSAU STREET  
City-State-Zip: TAMPA FL 33607

*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: ADAM CORWIN MGR**

**MGR**

**04/29/2021**

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

\_\_\_\_\_  
Date