

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000360296

Entity Name: LEGACY TREE SURGEON LLC

Current Principal Place of Business:

608 ORANGE ST
WELAKA, FL 32193

Current Mailing Address:

608 ORANGE ST
WELAKA, FL 32193

FEI Number: 84-3401916

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CLAY, JAMES E
608 ORANGE ST
WELAKA, FL 32193 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	AUTHORIZED MEMBER	Title	SECRETARY
Name	CLAY, JAMES EDWARD	Name	JOHNS, BRANDI L
Address	608 ORANGE ST	Address	608 ORANGE ST
City-State-Zip:	WELAKA FL 32193	City-State-Zip:	WELAKA FL 32193

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: BRANDI L JOHNS

SECRETARY

02/06/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date