

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000184560

**Entity Name:** AL POOL SERVICE, LLC

**Current Principal Place of Business:**

2479 WHITE LILLY DR  
KISSIMMEE, FL 34747

**Current Mailing Address:**

2479 WHITE LILLY DR  
KISSIMMEE, FL 34747 US

**FEI Number:** 38-4201007

**Certificate of Status Desired:** No

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

MAEMDO LLC  
220 KERSEY ST, 192 WEST  
220  
DAVENPORT, FL 33897 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 LEON, ARMANDO  
Address 2479 WHITE LILLY DR  
City-State-Zip: KISSIMMEE FL 34747

*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:** ARMANDO LEON

AMBR

03/13/2023

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

\_\_\_\_\_  
Date