

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000029575

**Entity Name:** UNIQUE LAWN SERVICE, LLC

**Current Principal Place of Business:**

1215 NE 4TH ST AVE K  
CARRABELLE, FL 32322

**Current Mailing Address:**

P.O. BOX 1301  
CARRABELLE, FL 32322 US

**FEI Number:** 26-7716872

**Certificate of Status Desired:** No

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

HOLLEY, OLIVIA D  
1215 NE 4TH ST AVE K  
CARRABELLE, FL 32322 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            HOLLEY, OLIVIA D  
Address        1215 NE 4TH ST AVE K  
City-State-Zip: CARRABELLE FL 32322

*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:** OLIVIA HOLLEY

AMBR

04/20/2024

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

\_\_\_\_\_  
Date