

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000334363

**Entity Name:** HANDYMAN REPAIR SERVICES OF WALTON COUNTY LLC

**Current Principal Place of Business:**

44 DOLPHIN CT  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

44 DOLPHIN CT  
SANTA ROSA BEACH, FL 32459 US

**FEI Number: 88-3491631**

**Certificate of Status Desired: Yes**

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

THAXTON, MARSHALL  
44 DOLPHIN CT  
SANTA ROSA BEACH, FL 32459 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            PRES  
Name            THAXTON, MARSHALL  
Address        44 DOLPHIN CT  
City-State-Zip: SANTA ROSA BEACH FL 32459

*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: MARSHALL THAXTON**

**MARSHALL THAXTON**

**03/20/2023**

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

\_\_\_\_\_ Date