

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000429807

**Entity Name:** SELECT PRO QUALITY, LLC

**Current Principal Place of Business:**

6017 PINE RIDGE RD  
445  
NAPLES, FL 34119

**Current Mailing Address:**

6017 PINE RIDGE RD  
STE. 445  
NAPLES, FL 34119 US

**FEI Number:** 92-0633940

**Certificate of Status Desired:** No

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

OLTEANU, IONELA  
6017 PINE RIDGE RD  
STE. 445  
NAPLES, FL 34119 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 SOARE, MARIUS MR  
Address 6017 PINE RIDGE RD  
STE. 445  
City-State-Zip: NAPLES FL 34119

*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:** MARIUS SOARE

MGR

04/16/2024

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

\_\_\_\_\_  
Date