

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L04000067957

1. Entity Name

BAY AREA MAINTENANCE AND TREE
CARE, LLC



FILED

05 OCT 28 PM 12:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2801 LINTHICUM PL.

Suite, Apt. #, etc.

3. Mailing Address

2801 LINTHICUM PL.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

TAMPA

City & State

FLORIDA

4. FEI Number

20-1041021

Applied For

Not Applicable

Zip

33618

Country

Hillsborough

Zip

33618

Country

U.S.A.

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

JOE VITELLO RALPH S. CAMPBELL

Street Address (P.O. Box Number is Not Acceptable)

8708 THORNWOOD LANE 2801 LINTHICUM
PLACE

City

TAMPA

FL

Zip Code

33618

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

JOSEPH VITELLO RALPH S. CAMPBELL

9/1/05

Signature, typed or printed name of registered agent and title if applicable

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State

DUE BY MAY 1

00061074959

1/05--01053--002 **50.00

9. MANAGING MEMBERS/MANAGERS

TITLE MEMBER
NAME RALPH S. CAMPBELL
STREET ADDRESS 2801 LINTHICUM PL.
CITY- ST- ZIP TAMPA, FL. 33618

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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

Ralph S. Campbell

10/26/05

(813) 924-2776