Daytime Phone #

LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

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A+ QUALITY MAID SERVICE, LLC						SECRETARY	OF STATE	
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			3. Mailing Address 1503 BLACK CREEK BLVD.			10/02/19-15/26	5002 **327.50	
1503 BLACK CREEK BLVD. Suite, Apt. #, etc			Suite, Apt. #, etc.					
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City & State			City & State			4. FEI Number	Applied F	or
FREEPORT, FL			FREEPORT, FL			<u>04-3835820</u>	Not Appli	cable
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					Name 7.	Name and Address of Curr	ent Registered Agent	
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8. The abo	ve named ent	tity submits th	is statement for the			registered office or regist	ered agent, or both,	
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	Signature, ty	ped or printed	name of registered	agen	and title if applic	able.	DATE	
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information i	ndicated on this r	eport is true and a	accurate and that my signa	ture sha	exemption stated in St If have the same legal	ection 119.07(3)(i), Florida Statute effect as if made under oath; that	:s. Hurmer certify that the :I am a managing member	
or manager	of the limited liabi	lity company or th	e receiver or trustee empo	wered to	execute this report as	s required by Chapter 608, Florida	Statutes	