

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L06000006159

1. Entity Name
YOUNG CARPENTRY AND HOME MAINTENANCE LLC



Principal Place of Business
**3392 ELKCAM BLVD
CHIPLEY, FL 32428**

Mailing Address
**3392 ELKCAM BLVD
CHIPLEY, FL 32428**

FILED
Sep 12, 2008 08:00 AM
Secretary of State



09112008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
14-1948303

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**YOUNG, NICHOLAS
5665 LOT C HWY 77
CHIPLEY, FL 32428**

**DO NOT WRITE
IN THIS SPACE**

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

Nicholas Young
(NOTE: Registered Agent signature required when reinstating)

9/11/08
DATE

**FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
YOUNG, NICHOLAS
5665 LOT C HWY 77
CHIPLEY, FL 32428**

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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060000959608
09/12/08-80001-017 138.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: Nicholas Young Nicholas Young
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

9/11/08
(850) 527-4592