

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000058077

Entity Name: NO MOW WORRIES LLC

FILED
Apr 29, 2012
Secretary of State

Current Principal Place of Business:

11390 ASTON HALL DR. S
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 352056
JACKSONVILLE, FL 32235

New Mailing Address:

FEI Number: 90-0742172

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATKINS, JOHN
11390 ASTON HALL DR. S
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: WATKINS, JOHN
Address: 11390 ASTON HALL DR. S
City-St-Zip: JACKSONVILLE, FL 32246

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: JOHN WATKINS

MGRM

04/29/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date