

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000083718

Entity Name: A-1 BEST SERVICE LLC

FILED  
Feb 09, 2012  
Secretary of State

## Current Principal Place of Business:

32854 CR 437 N  
SORRENTO, FL 32776 US

## New Principal Place of Business:

252 W ARDICE AVE  
STE 420  
EUSTIS, FL 32726 US

## Current Mailing Address:

32854 CR 437 N  
SORRENTO, FL 32776 US

## New Mailing Address:

252 W ARDICE AVE  
STE 420  
EUSTIS, FL 32726 US

FEI Number: 80-0782836

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEPORTE, LEANDRA  
32854 CR 437 N  
SORRENTO, FL 32776 US

## Name and Address of New Registered Agent:

LEPORTE, LEANDRA  
252 W ARDICE AVE  
STE 420  
EUSTIS, FL 32726 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:

02/09/2012

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM  
Name: LEPORTE, LEANDRA  
Address: 3601 SW RIVER PKWY UNIT 1412  
City-St-Zip: PORTLAND, OR 97239 US

Title: MGRM  
Name: LEPORTE, CAESAR  
Address: 252 W ARDICE AVE STE 420  
City-St-Zip: EUSTIS, FL 32726 US

Title: MGRM  
Name: LEPORTE, DEBORAH  
Address: 252 W ARDICE AVE STE 420  
City-St-Zip: EUSTIS, FL 32726 US

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: LEANDRA LEPORTE

MGRM

02/09/2012

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