

**2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L12000017765

**Entity Name:** EFFICIENT SECURITY AND PROTECTION, LLC

**Current Principal Place of Business:**

782 4TH ST DR SW  
HICKORY, NC 28602

**Current Mailing Address:**

782 4TH ST DR SW  
HICKORY, NC 28602 US

**FEI Number:** APPLIED FOR

**Name and Address of Current Registered Agent:**

SANTOS, IVAN  
40 SANDLEWOOD COVE  
WINTER PARK, FL 32789 US

**FILED**  
**Mar 27, 2024**  
**Secretary of State**  
**6327559670CC**

**VOID**

600421739676

**Certificate of Status Desired:** Yes

**See 04/02/24 Statement of Fact**

*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

**Authorized Person(s) Detail :**

**Title** PRESIDENT  
**Name** SANTOS, IVAN  
**Address** 2520 CADILLAC AVENUE  
**City-State-Zip:** ORLANDO FL 32818

**Title** OWNER 1/2  
**Name** GARFIELD, JAMES  
**Address** PO BOX 4475  
**City-State-Zip:** WINTER PARK FL 32793

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** JAMES GARFIELD

OWNER 1/2

03/27/2024

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date