

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000085210

**Entity Name:** GREEN ISLAND PEST CONTROL, LLC

**Current Principal Place of Business:**

2303 WOODLEAF CT  
ORLANDO, FL 32837

**Current Mailing Address:**

2303 WOODLEAF CT  
ORLANDO, FL 32837 US

**FEI Number: 13-4292593**

**Certificate of Status Desired: No**

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

PATRICK, ROBIN B  
2303 WOODLEAF CT  
ORLANDO, FL 32837 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MANAGER
Name	PATRICK, ROBIN B	Name	PATRICK, MARILYN
Address	2303 WOODLEAF CT	Address	2303 WOODLEAF CT
City-State-Zip:	ORLANDO FL 32837	City-State-Zip:	ORLANDO FL 32837

*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: MARILYN PATRICK**

**MANAGER**

**04/23/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date