

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000063620

Entity Name: GARFIELD'S PEST CONTROL, LLC

Current Principal Place of Business:

6113 NW 45 AVE
COCONUT CREEK, FL 33073

Current Mailing Address:

PO BOX 3232
NANTUCKET, MA 02584 US

FEI Number: 30-0446113

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLOISE, GARFIELD DWIGHT
7980 NW 50 ST
508
LAUDERHILL, FL 33351 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 CHAIRMAN
Name BLOISE, GARFIELD DWIGHT
Address 42 MONOHANSETT RD
City-State-Zip: NANTUCKET MA 02554

Title VP
Name BLOISE, GILLIAN K DR.
Address 42 MONOHANSETT RD
City-State-Zip: NANTUCKET MA 02554

Title MANAGER
Name WOLLISTON, KEMAR
Address 8132 NW 17TH MANOR
City-State-Zip: PLANTATION FL 33322

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: GARFIELD BLOISE

CHAIRMAN

02/13/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date