

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000124047

Entity Name: SWATTER PEST SOLUTIONS LLC

Current Principal Place of Business:

4406 PLATT RD
PLANT CITY, FL 33565

Current Mailing Address:

PO BOX 3326
PLANT CITY, FL 33563 US

FEI Number: 26-1567387

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FAILE, JASON SR
4406 PLATT RD
PLANT CITY, FL 33565 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 MGR
Name FAILE, JASON M
Address 4406 PLATT RD
City-State-Zip: PLANT CITY FL 33565

Title MGR
Name FAILE, ANGELA B
Address 4406 PLATT RD.
City-State-Zip: PLANT CITY FL 33565

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: ANGELA FAILE

MGR

04/16/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date