

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000044399

Entity Name: MATT'S CERTIFIED TREE CARE, LLC

Current Principal Place of Business:

5178 OLIVET DRIVE
DADE CITY, FL 33523

Current Mailing Address:

5178 OLIVET DRIVE
DADE CITY, FL 33523 US

FEI Number: 41-2278229

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COTTON, JULIE P
14144 6TH ST.
DADE CITY, FL 33523 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: JULIE P COTTON

01/19/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name BROWN, TRACY R
Address 5178 OLIVET DR
City-State-Zip: DADE CITY FL 33523

Title MGR
Name RICH, MATTHEW C
Address 5178 OLIVET DR
City-State-Zip: DADE CITY FL 33523

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: TRACY R BROWN

MGRM

01/19/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date