# 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000081016

Entity Name: PROFESSIONAL ASSEMBLY AND INSTALLATION SERVICES

LLC

## **Current Principal Place of Business:**

3466 COACHMAN DRIVE DELTONA, FL 32738

# **Current Mailing Address:**

3466 COACHMAN DRIVE DELTONA, FL 32738 US

FEI Number: 59-3589326 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LARSH, RUSS 3466 COACHMAN DRIVE DELTONA, FL 32738 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

**FILED** Mar 24, 2014

**Secretary of State** 

CC4743747137

### Authorized Person(s) Detail:

**MGRM** 

Name LARSH, RUSS

SIGNATURE: RUSS LARSH

Address 3466 COACHMAN DRIVE City-State-Zip: DELTONA FL 32738

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.

**MGR** 

Electronic Signature of Signing Authorized Person(s) Detail

03/24/2014

Date