

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000027809

Entity Name: XTINGUISH PEST CONTROL, LLC

Current Principal Place of Business:

1580 NW 19 ST
HOMESTEAD, FL 33030

Current Mailing Address:

P.O. 900836
HOMESTEAD, FL 33030

FEI Number: 26-4608330

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALDAMA, JASON
1580 NW 19 ST
HOMESTEAD, FL 33030 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 ALDAMA, JASON R
Address 1580 NW 19 ST
City-State-Zip: HOMESTEAD FL 33030

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: JASON ALDAMA

MANAGER

03/27/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date