

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000049995

**Entity Name:** AUTHORITY LANDSCAPE MANAGEMENT, LLC

**Current Principal Place of Business:**

1568 WOODWIND DR.  
APOPKA, FL 32703

**Current Mailing Address:**

1568 WOODWIND DR.  
APOPKA, FL 32703 UN

**FEI Number: 27-0275514**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

TORRES, JOSE  
1568 WOODWIND DR  
APOPKA, FL 32703 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 MGRM  
Name TORRES, JOSE  
Address 1568 WOODWIND DR.  
City-State-Zip: APOPKA FL 32703

*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: JOSE TORRES**

**OWNER**

**04/27/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date