## SIGNATURE: TIMOTHY J FREDRICKSON

Electronic Signature of Signing Authorized Person(s) Detail

#### 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L09000117188

## Entity Name: AIR-MASTERS HVAC MECHANICAL SERVICES. LLC

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

6970 BUSINESS PARK BLVD NORTH SUITE 11 JACKSONVILLE, FL 32256

## **Current Mailing Address:**

6970 BUSINESS PARK BLVD NORTH SUITE 11 JACKSONVILLE, FL 32256 US

#### FEI Number: 80-0516824

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

FREDRICKSON, TIMOTHY J 6970 BUSINESS PARK BLVD NORTH SUITE 11 JACKSONVILLE, FL 32256 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

#### Authorized Person(s) Detail :

Title MGR FREDRICKSON, TIMOTHY J Name 14615 BERRINGER LN Address City-State-Zip: JACKSONVILLE FL 32258

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.

PRESIDENT

# Certificate of Status Desired: Yes

Date

FILED Mar 08, 2019 Secretary of State 5823951903CC

03/08/2019

Date