

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000002221

**Entity Name:** FLOYD'S PLUMBING, LLC

**Current Principal Place of Business:**

4145 SE 47 PLACE  
OPTIONAL  
OCALA, 34480

**Current Mailing Address:**

4145 SE 47 PLACE  
OPTIONAL  
OCALA, 34480 UN

**FEI Number:** 27-1583914

**Certificate of Status Desired:** No

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

OLIVER, KENNY  
4145 SE 47 PLACE  
OCALA, FL 34480 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	Title	MGR
Name	OLIVER, KENNY	Name	OLIVER, HALEY
Address	4145 SE 47 PLACE OPTIONAL	Address	4145 SE 47 PLACE OPTIONAL
City-State-Zip:	OCALA 34480	City-State-Zip:	OCALA 34480

*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:** HALEY OLIVER

**MGR**

**01/12/2017**

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

\_\_\_\_\_  
Date