

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000001894

**Entity Name:** GLOW SERVICES, LLC

**Current Principal Place of Business:**

38439 5TH AVE  
300  
ZEPHYRHILLS, FL 33542

**Current Mailing Address:**

38439 5TH AVE  
300  
ZEPHYRHILLS, FL 33542

**FEI Number:** 27-4458199

**Certificate of Status Desired:** No

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

PHILLIPS, REGINA R  
38439 5TH AVE  
300  
ZEPHYRHILLS, FL 33542 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 PHILLIPS, REGINA R  
Address 38439 5TH AVE #300  
City-State-Zip: ZEPHYRHILLS FL 33542

Title AUTHORIZED REPRESENTATIVE  
Name PHILLIPS, BRIAN W  
Address 38439 5TH AVE  
300  
City-State-Zip: ZEPHYRHILLS FL 33542

*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:** REGINA R PHILLIPS

MGRM

03/18/2017

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

\_\_\_\_\_  
Date