

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000060739

**Entity Name:** AIR PRO MECHANICAL OF NORTH FLORIDA, LLC

**Current Principal Place of Business:**

1633 FARM WAY  
505  
MIDDLEBURG, FL, FL 32068

**Current Mailing Address:**

1633 FARM WAY  
505  
MIDDLEBURG, FL, FL 32068 US

**FEI Number:** 45-2440497

**Certificate of Status Desired:** No

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

HICKMAN, MICHAEL S  
1008 COUNTY ROAD 217  
MAXVILLE, FL 32234 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 HICKMAN, MICHAEL S  
Address 1008 COUNTY ROAD 217  
City-State-Zip: MAXVILLE FL 32234

*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:** MICHAEL HICKMAN

MGR

06/26/2020

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

\_\_\_\_\_  
Date