## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000066795

**Entity Name: HELMS CONTRACTING LLC** 

**Current Principal Place of Business:** 

678 WILL OWENS ROAD LAUREL HILL. FL 32567

**Current Mailing Address:** 

P.O. BOX 1501

CRESTVIEW. FL 32536 US

FEI Number: 45-3608598 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HELMS, ROBERT OWNER 678 WILL OWENS ROAD LAUREL HILL, FL 32567 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: ROBERT HELMS 01/28/2015

Electronic Signature of Registered Agent

Date

FILED Jan 28, 2015

**Secretary of State** 

CC5258536041

Authorized Person(s) Detail:

Title MRGM

Name HELMS, ROBERT A

Address PO BOX 1501

City-State-Zip: CRESTVIEW FL 32536

SIGNATURE: ROBERT A HELMS

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.

**MRGM**