## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000111379

Entity Name: EXPERT REMOVAL SERVICE LLC

**Current Principal Place of Business:** 

**UNIT F** SARASOTA, FL 34240

2147 PORTER LAKE DRIVE

## **Current Mailing Address:**

2147 PORTER LAKE DRIVE **UNIT F** SARASOTA, FL 34240 UN

FEI Number: 45-3460501 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

JASEK, TOMAS 1044 MEADOW BREEZE LN SARASOTA, FL 34240 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

**FILED** Feb 26, 2016

**Secretary of State** 

CC6994459386

## Authorized Person(s) Detail:

Title MGR

JASEK, TOMAS Name

1044 MEADOW BREEZE LN Address

City-State-Zip: SARASOTA FL 34240

SIGNATURE: TOMAS JASEK

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.

MANAGER