

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000140407

**Entity Name:** REDEEMED PROPERTY MAINTENANCE & RESTORATION, LLC

**FILED**  
**Apr 05, 2017**  
**Secretary of State**  
**CC4486097746**

**Current Principal Place of Business:**

6635 W. COMMERCIAL BLVD  
108  
TAMARAC, FL 33321

**Current Mailing Address:**

PO BOX 25173  
TAMARAC, FL 33320 US

**FEI Number:** 45-4700123

**Certificate of Status Desired:** No

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

WIMBERLY, WARENS L  
6635 W. COMMERCIAL BLVD  
108  
TAMARAC, FL 33321 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           WIMBERLY, WARENS L  
Address        PO BOX 25173  
City-State-Zip: TAMARAC FL 33320

Title           AUTHORIZED MEMBER  
Name           WIMBERLY, DAVID  
Address        6635 W. COMMERCIAL BLVD  
                  108  
City-State-Zip: TAMARAC FL 33321

*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:** WARENS WIMBERLY

**MGR**

**04/05/2017**

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

\_\_\_\_\_  
Date