

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000074417

**Entity Name:** HAMMOCK LANDSCAPING LLC

**Current Principal Place of Business:**

1764 W NEW LENOX LANE  
DUNNELLON, FL 34434

**Current Mailing Address:**

PO BOX 1861  
DUNNELLON, FL 34430 US

**FEI Number:** 27-4749513

**Certificate of Status Desired:** No

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

HAMMOCK, BRIAN  
1764 W NEW LENOX LANE  
DUNNELLON, FL 34434 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:** BRIAN HAMMOCK

04/27/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                    |                 |                           |
|-----------------|--------------------|-----------------|---------------------------|
| Title           | MGR                | Title           | AUTHORIZED REPRESENTATIVE |
| Name            | HAMMOCK, BRIAN J   | Name            | NEUMANN, MICHELLE         |
| Address         | PO BOX 1861        | Address         | PO BOX 1861               |
| City-State-Zip: | DUNNELLON FL 34430 | City-State-Zip: | DUNNELLON FL 34430        |

*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:** BRIAN HAMMOCK

MANAGER

04/27/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date