## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000021746

Entity Name: DIAMOND CATASTROPHE RESTORATION, LLC

**Current Principal Place of Business:** 

8383 SHADOW PINE WAY SARASOTA, FL 34238

**Current Mailing Address:** 

8383 SHADOW PINE WAY SARASOTA, FL 34238 US

FEI Number: 46-2108372 Certificate of Status Desired: No

**FILED** Jan 22, 2018

**Secretary of State** 

CC0766753553

Date

Date

Name and Address of Current Registered Agent:

SEPTER, GARY W 8383 SHADOW PINE WAY SARASOTA, FL 34238 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: GARY SEPTER 01/22/2018

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGRM Title MANAGER

Name GARY, SEPTER Name SEPTER, MICHELE J Address 8383 SHADOW PINE WAY Address 8383 SHADOW PINE WAY City-State-Zip: SARASOTA FL 34238 City-State-Zip: SARASOTA FL 34238

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.

01/22/2018 SIGNATURE: GARY SEPTER **MANAGER**