

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000038199

**Entity Name:** XCLUSIVE PAINTING SERVICES LLC

**Current Principal Place of Business:**

7311 HOLLY ST  
ZELLWOOD, FL 32798

**Current Mailing Address:**

P.O. BOX 1082  
ZELLWOOD, FL 32798 US

**FEI Number:** 90-0952797

**Certificate of Status Desired:** Yes

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

ROBINSON, NORMAN CSR  
7311 HOLLY ST  
ZELLWOOD, FL 32798 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            CEO  
Name            NORMAN, ROBINSON CSR  
Address        7311 HOLLY ST  
City-State-Zip: ZELLWOOD FL 32798

*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:** NORMANROBINSON

CEO

04/24/2019

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

\_\_\_\_\_  
Date