

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000073473

**Entity Name:** CITY OF PALMS CARPET CARE LLC

**Current Principal Place of Business:**

4529 DALMAHOY CT.  
#503  
FT. MYERS, FL 33916

**Current Mailing Address:**

4529 DALMAHOY CT.  
#503  
FT. MYERS, FL 33916

**FEI Number:** 46-2815234

**Certificate of Status Desired:** No

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

DEVINE, JAMES P. JR.  
4529 DALMAHOY CT.  
#503  
FT. MYERS, FL 33916 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 MGRM  
Name DEVINE, JAMES P JR.  
Address 4529 DALMAHOY CT.#503  
City-State-Zip: FT. MYERS FL 33916

*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:** JAMES P DEVINE JR

**MANAGING MEMBER**

**04/29/2022**

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

\_\_\_\_\_  
Date