

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000102356

**Entity Name:** GOODCARBS ECONOMY LAWN SERVICES LLC

**Current Principal Place of Business:**

1225 NE 1ST TER  
SUITE 6  
HOMESTEAD, FL 33030

**Current Mailing Address:**

1225 NE 1ST TER  
SUITE 6  
HOMESTEAD, FL 33030 US

**FEI Number:** 46-3232594

**Certificate of Status Desired:** No

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

NEWKIRK-CARBS, LATASHA F  
1225 NE 1ST TER  
SUITE 6  
HOMESTEAD, FL 33030 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            PRESIDENT, PRESIDENT  
Name            NEWKIRK-CARBS, LATASHA  
Address        1225 NE 1ST TER SUITE #6  
City-State-Zip: HOMESTEAD FL 33030

Title            VP  
Name            CARBS, ROBERT L  
Address        1225 NE 1ST TER SUITE #6  
City-State-Zip: HOMESTEAD FL 33030

Title            SECRETARY  
Name            NEWKIRK-CARBS, LATASHA  
Address        1225 NE 1TERR  
                 SUITE 6  
City-State-Zip: MIAMI FL 33030

Title            TREASURER  
Name            NEWKIRK- CARBS, LATAARSHA  
Address        1225 NE 1TERR  
                 SUITE 6  
City-State-Zip: HOMESTEAD FL 33030

*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:** LATARSHA NEWKIRK-CARBS

**PRESIDENT**

**03/22/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date