

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000007817

Entity Name: ALL SCAPE SUPPLY LLC

Current Principal Place of Business:

5600 W. MIDWAY RD.
FT. PIERCE, FL 34981

FILED
Apr 14, 2016
Secretary of State
CC2584666997

Current Mailing Address:

5600 W. MIDWAY RD.
FT. PIERCE, FL 34981

FEI Number: 46-4521576

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHWARTZ, MATTHEW
1640 LAKEFIELD NO. CT.
WELLINGTON, FL 33414 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 AMBR
Name SCHWARTZ, MATTHEW
Address 1640 LAKEFIELD NO. CT.
City-State-Zip: WELLINGTON FL 33414

Title AMBR
Name PETRI, PETER
Address 125 E. MIDWAY RD.
City-State-Zip: FT. PIERCE FL 34982

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: PETER PETRI

AMBR

04/14/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date