

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000080249

**Entity Name:** MY JACKSONVILLE LANDSCAPER, LLC

**Current Principal Place of Business:**

253 ROYAL PALMS DR  
SUITE 1  
ATLANTIC BEACH, FL 32233

**Current Mailing Address:**

253 ROYAL PALMS DR  
SUITE 1  
ATLANTIC BEACH, FL 32233 US

**FEI Number:** 46-5690182

**Certificate of Status Desired:** No

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

MCGRAW, DAVID R II  
253 ROYAL PALMS DR  
SUITE 1  
ATLANTIC BEACH , FL 32233 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 MGR  
Name MCGRAW, DAVID R II  
Address 891 16TH AVENUE S  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title MGR  
Name RIVERA, MICHAEL  
Address 8319 HIGHFIELD AVE  
City-State-Zip: JACKSONVILLE FL 32216

*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:** DAVID MCGRAW

**CEO**

**01/10/2018**

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

\_\_\_\_\_  
Date