

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000112062

Entity Name: ZAMBELLI LAWN CARE, LLC

Current Principal Place of Business:

6019 NW 90 ST.
GAINESVILLE, FL 32653

Current Mailing Address:

6019 NW 90 ST.
GAINESVILLE, FL 32653 US

FEI Number: 47-1376416

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAK COURT
A
TAMPA, FL 33612 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 ZAMBELLI, JUSTIN
Address 6019 NW 90 ST.
City-State-Zip: GAINESVILLE FL 32653

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: JUSTIN ZAMBELLI

SOLE MEMBER

04/30/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date