

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000162882

**Entity Name:** JOSE NURSERY AND LAWN SERVICE, LLC

**Current Principal Place of Business:**

5660 GRIFFIN ROAD  
DAVIE, FL 33314

**Current Mailing Address:**

5660 GRIFFIN ROAD  
DAVIE, FL 33314

**FEI Number:** 47-2137647

**Certificate of Status Desired:** No

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

LEVIA TORRES, JOSE S  
3121 SW 22ND STREET  
FT. LAUDERDALE, FL 33312 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 LEIVA TORRES, JOSE S  
Address 3121 SW 22ND STREET  
City-State-Zip: FT. LAUDERDALE FL 33312

Title AMBR  
Name TORRES, JOSE S  
Address 404 SE 23RD STREET  
City-State-Zip: FT. LAUDERDALE FL 33316

*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:** JOSE S L TORRES

**MANAGER**

01/11/2015

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

\_\_\_\_\_  
Date