| MIMS, FL 32754 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: | ANTONIO LOYD | | | 03/31/2022 | |
| | | Electronic Signature of Registered Agent | | | Date | |
| | Authorized Person(s) Detail : | | | | | |
| | Title C | OWER | Title | AMBR | | |
| | Name V | /ERZATILE LAWN CARE | Name | MONTGOMERY, TIKARA | | |
| | | | | | | |

Address

City-State-Zip:

Current Principal Place of Business: 2646 HARRY T MOORE AVE MIMS, FL 32754

DOCUMENT# L15000055690

Entity Name: VERZATILE LAWN CARE LLC

Current Mailing Address:

2646 HARRY T MOORE AVE MIMS. FL 32754 US

FEI Number: 45-1120655

Name and Address of Current Registered Agent:

2646 HARRY T MOORE AVE

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

LOYD, ANTONIO A SR. 2646 HARRY T MOORE AVE MIMS, F

City-State-Zip: MIMS FL 32754

Title Name Address

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: ANTONI LOYD

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

2646 HARRY T MOORE AVE

MIMS FL 32754

Date

03/31/2022

```
OWNER
```