

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000139036

Entity Name: PESTOLOGY L.L.C.

Current Principal Place of Business:

3211 KATYS CT.
GREEN COVE SPRINGS, FL 32043

Current Mailing Address:

PO BOX 9596
FLEMING ISLAND, FL 32006

FEI Number: 81-3391828

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALKER, JOSPEH E
3211 KATYS CT.
GREEN COVE SPRINGS, FL 32043 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 WALKER, JOSEPH E
Address 3211 KATYS CT.
City-State-Zip: GREEN COVE SPRINGS FL 32043

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: JOSEPH E. WALKER

MNGR

01/09/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date