

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000186030

**Entity Name:** O.C. PRESSURE WASHER, LLC

**Current Principal Place of Business:**

891 HONEYCOMB TRAIL  
ST. AUGUSTINE , FL 32095

**Current Mailing Address:**

891 HONEYCOMB TRAIL  
ST. AUGUSTINE , FL 32095 US

**FEI Number:** 81-0962793

**Certificate of Status Desired:** No

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

CRUZ, ORLANDO  
891 HONEYCOMB TRAIL  
ST. AUGUSTINE , FL 32095 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 CRUZ, ORLANDO  
Address 891 HONEYCOMB TRAIL  
City-State-Zip: ST. AUGUSTINE FL 32095

*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:** ORLANDO CRUZ

MGR

04/28/2025

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

\_\_\_\_\_  
Date