

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000034299

**Entity Name:** AEROSHINE SERVICES LLC

**Current Principal Place of Business:**

11007 US HWY 301 N  
THONOTOSASSA, FL 33592

**Current Mailing Address:**

11007 US HWY 301 N  
THONOTOSASSA, FL 33592

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

SIMMONS, WILLIAM  
11007 US HWY 301 N  
THONOTOSASSA, FL 33592 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            AR  
Name            SIMMONS, WILLIAM  
Address        11007 US HWY 301 N  
City-State-Zip: THONOTOSASSA FL 33592

*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:** WILLIAM SIMMONS

CEO

04/09/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date