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. 01/09/2025

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: JENNA MELCHIONNO

SIGNATURE: ANTHINY MARSHALL

Authorized Person(s) Detail :

Title AMBR MELCHIONNO. JENNA 13941 SW 22ND PL City-State-Zip: DAVIE FL 33325

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000038304

Entity Name: MARSHALL'S TREE SERVICE AND LANDSCAPING LLC

Current Principal Place of Business:

7580 NW 5TH ST, APT #15601 PLANTATION, FL 33317

Current Mailing Address:

P.O. BOX 15601 PLANTATION, FL 33318 US

FEI Number: 47-5600728

Name and Address of Current Registered Agent:

MARSHALL, ANTHINY 13941 SW 22ND PL DAVIE, FL 33325 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.

Electronic Signature of Registered Agent

Name Address

Certificate of Status Desired: No

01/09/2025

Date

FILED Jan 09, 2025 Secretary of State 1973288420CC

AMBR

Date