# 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 F. LABELLA

Electronic Signature of Signing Authorized Person(s) Detail

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

### Authorized Person(s) Detail :

Title	MBR
Name	LABELLA, JOSEPH F
Address	1450 OLD CYPRESS TRAIL
City-State-Zip:	WELLINGTON FL 33414

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L17000166769

#### Entity Name: EAST COAST INVESTIGATION & SECURITY SERVICES, LLC

### **Current Principal Place of Business:**

1450 OLD CYPRESS TRAIL WELLINGTON. FL 33414

### **Current Mailing Address:**

1450 OLD CYPRESS TRAIL WELLINGTON, FL 33414 US

## FEI Number: 82-2395541

# Name and Address of Current Registered Agent:

LABELLA, JOSEPH F 1450 OLD CYPRESS TRAIL WELLINGTON, FL 33414 US

03/25/2019 OWNER

Date

FILED Mar 25, 2019 Secretary of State 3077314747CC

Certificate of Status Desired: Yes

Date