

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000138261

**FILED**  
**Sep 03, 2019**  
**Secretary of State**  
**7115126929CC**

**Entity Name:** NORDIC & SONS ALL PHASE MAINTENANCE AND REPAIR, LLC

**Current Principal Place of Business:**

20010 SW 112 AVE  
MIAMI, FL 33189

**Current Mailing Address:**

5312 HOLLYCREST DRIVE  
JACKSONVILLE, FL 32205 US

**FEI Number: 83-1497679**

**Certificate of Status Desired: Yes**

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

BLOMSETH, DANA  
20010 SW 112 AVE  
MIAMI, FL 33189 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 BLOMSETH, DANA  
Address 20010 SW 112 AVE  
City-State-Zip: MIAMI FL 33189

Title AMBR  
Name IVERSON BLOMSETH, STEN WILMOT  
Address 5312 HOLLYCREST DRIVE  
City-State-Zip: JACKSONVILLE FL 32205

Title MGR  
Name BLOMSETH, GARY  
Address 5312 HOLLYCREST DRIVE  
City-State-Zip: JACKSONVILLE FL 32205

*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: IVERSON BLOMSETH , STEN WILMOT**

**AMBR**

**09/03/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date