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: RANGEL VAZQUEZ

I

Electronic Signature of Signing Authorized Person(s) Detail

PRESIDENT

03/30/2022 Date

Certificate of Status Desired: No

The abo

SIGNATURE	: MARC A VASSOR			03/30/2022		
	Electronic Signature of Registered Agent			Date		
Authorized Person(s) Detail :						
Title	MGR	Title	PRESIDENT			
Name	VAZQUEZ, RANGEL	Name	VAZQUEZ, RANGEL			
Address	2249 SW ELMWOOD AVE.	Address	2249 SW ELMWOOD AVE			
City-State-Zip:	PORT ST. LUCIE FL 34953	City-State-Zip:	PORT ST. LUCIE FL 34953			

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000172702

Entity Name: AGUABREEZE POOL & SPA SERVICE LLC

Current Principal Place of Business:

2249 SW ELMWOOD AVE. PORT ST. LUCIE, FL 34953

Current Mailing Address:

2249 SW ELMWOOD AVE. PORT ST. LUCIE, FL 34953 US

FEI Number: 83-1536911

Name and Address of Current Registered Agent:

LIBERTY TAX SERVICE 2842 SW PORT ST LUCIE BLVD PORT ST. LUCIE, FL 34953 US

ove named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.							
ATURE:	: MARC A VASSOR						
	Electronic Signature of Registered Agent			Date			
orized Person(s) Detail :							
Ν	MGR	Title	PRESIDENT				
e V	/AZQUEZ, RANGEL	Name	VAZQUEZ, RANGEL				

FILED Mar 30, 2022 Secretary of State 0539368915CC