iniber. 03-1300300	Certificate of Statt
and Address of Current Registered Agent:	
ACH, JUSTIN C ASANT OAKS TRL N, FL 32764 US	
N, FL 32764 US	

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000190589

Entity Name: ARBORIST DOCTOR, LLC

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

490 PLEASANT OAKS TRL OSTEEN, FL 32764

### **Current Mailing Address:**

490 PLEASANT OAKS TRL OSTEEN. FL 32764

## FEI Number: 83-1508560

#### Name a

STEINBA 490 PLE/ OSTEEN

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	JUSTIN C STEINBACH		04/09/2023	
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MANAGER	
Name	STEINBACH, JUSTIN C	Name	TERACINO, CATHERINE M	
Address	490 PLEASANT OAKS TRL	Address	2303 TAMARIND DR	
City-State-Zip:	OSTEEN FL 32764	City-State-Zip:	EDGEWATER FL 32141	

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: JUSTIN STEINBACH

OWNER

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04/09/2023
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Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Apr 09, 2023 Secretary of State 1698980730CC

Certificate of Status Desired: No