## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000206042

Entity Name: STUART PEST MANAGEMENT, LLC

**Current Principal Place of Business:** 

565 SW RUSTIC CIRCLE STUART, FL 34997

**Current Mailing Address:** 

565 SW RUSTIC CIRCLE STUART, FL 34997

FEI Number: 83-1748450 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOHOREK, AMANDA K 565 SW RUSTIC CIRCLE STUART, FL 34997 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

FILED Apr 08, 2025

**Secretary of State** 

1611720336CC

## Authorized Person(s) Detail:

Title MGR

Name MOHOREK, AMANDA K
Address 565 SW RUSTIC CIRCLE
City-State-Zip: STUART FL 34997

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: AMANDA MOHOREK

Electronic Signature of Signing Authorized Person(s) Detail

**MGR** 

04/08/2025