

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000138359

Entity Name: CASTAWAY POOL AND SPA REPAIR, LLC

Current Principal Place of Business:

734 DOCTOR AVE
SEBASTIAN, FL 32958

Current Mailing Address:

PO BOX 780326
SEBASTIAN, FL 32978 US

FEI Number: 84-1963735

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MISTER, KRIS K
734 DOCTOR AVE
SEBASTIAN, FL 32958 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	Title	AMBR
Name	MISTER, KRIS K	Name	MILLER, MATT
Address	734 DOCTOR AVE	Address	9315 FRANGIPANI DR
City-State-Zip:	SEBASTIAN FL 32958	City-State-Zip:	VERO BEACH FL 32963

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: KRIS MISTER

OWNER

01/11/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date