FEI Number	r: 84-3205075		Certificate of Status Desired	: No
Name and A	Address of Current Registered Agen	t:		
RUOSS, JOHN 2052 WATER (FLEMING ISLA				
The above name	d entity submits this statement for the purpose of chan E:	ging its registered office or regis	tered agent, or both, in the State of Florida.	
	, , ,	ging its registered office or regis	tered agent, or both, in the State of Florida.	Date
SIGNATURI	E:	ging its registered office or regis	tered agent, or both, in the State of Florida.	Date
SIGNATURI	E: Electronic Signature of Registered Agent	ging its registered office or regis	tered agent, or both, in the State of Florida.	Date
SIGNATURI Authorized	E: Electronic Signature of Registered Agent Person(s) Detail :			Date
SIGNATURI Authorized Title	E: Electronic Signature of Registered Agent Person(s) Detail : AR	Title	AR	Date

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.

AR

SIGNATURE: RUOSS, JOHN K

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 27, 2021 **Secretary of State** 4240626676CC

01/27/2021

Date

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000180115

Entity Name: WHOLE 9 YARDS SERVICES, LLC

Current Principal Place of Business:

5051 HWY 17 SOUTH GREEN COVE SPRINGS, FL 32043

Current Mailing Address: