

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000175320

**Entity Name:** STAY COOL COIL CLEANING SERVICE LLC

**Current Principal Place of Business:**

1600 SCRANTON ST SOUTH  
ST. PETERSBURG, AL 33711

**Current Mailing Address:**

1600 SCRANTON ST SOUTH  
ST. PETERSBURG, FL 33711

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RANGER, DAVID A  
1600 SCRANTON ST SOUTH  
ST. PETERSBURG, FL 33712 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  
Name RANGER, DAVID A  
Address 1600 SCRANTON ST SOUTH  
City-State-Zip: SAINT PETERSBURG FL 33711

Title AMBR  
Name RANGER, DAVID A  
Address 1600 SCRANTON ST SOUTH  
City-State-Zip: ST.PETERSBURG FL 33711

Title AP  
Name RANGER, DAVID A  
Address 1600 SCRANTON ST SOUTH  
City-State-Zip: SAINT PETERSBURG FL 33711

Title MGR  
Name RANGER, DAVID A  
Address 1600 SCRANTON ST SOUTH  
City-State-Zip: ST.PETERSBURG FL 33711

Title AMBR  
Name RANGER, DAVID A  
Address 1600 SCRANTON ST SOUTH  
City-State-Zip: ST.PETERSBURG FL 33711

Title AP  
Name RANGER, DAVID A  
Address 1600 SCRANTON ST SOUTH  
City-State-Zip: ST.PETERSBURG FL 33711

*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:** DAVID RANGER

**OWNER**

**04/09/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date