

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000344408

**Entity Name:** 365 PRO SERVICES LLC

**Current Principal Place of Business:**

2952 PALMETTO RIDGE WAY  
LYNN HAVEN, FL 32444

**Current Mailing Address:**

1914 FRANKFORD AVENUE  
UNIT 1032  
PANAMA CITY, FL 32405 US

**FEI Number:** 88-3609786

**Certificate of Status Desired:** No

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

JONES, DESMOND  
2952 PALMETTO RIDGE WAY  
LYNN HAVEN, FL 32444 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            AMBR  
Name            JONES, DESMOND  
Address        2952 PALMETTO RIDGE WAY  
City-State-Zip: LYNN HAVEN FL 32444

*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:** DESMOND JONES

AMBR

02/24/2024

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date