

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000361791

**Entity Name:** 365 HANDYMAN & POOL SERVICES LLC

**Current Principal Place of Business:**

919 SE 16TH TERRACE  
CAPE CORAL, FL 33990

**Current Mailing Address:**

919 SE 16TH TERRACE  
CAPE CORAL, FL 33990

**FEI Number:** 88-3745831

**Certificate of Status Desired:** No

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

GONZALEZ, DAVE E  
919 SE 16TH TERRACE  
CAPE CORAL, FL 33990 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 GONZALEZ, DAVE E  
Address 919 SE 16TH TERRACE  
City-State-Zip: CAPE CORAL FL 33990

Title MGR  
Name ROSADO, LEISHLA  
Address 5781 CAPE HARBOUR DR. UNIT 503  
City-State-Zip: CAPE CORAL FL 33914

Title MGR  
Name NIEVES, LUZ  
Address 919 SE 16TH TERRACE  
City-State-Zip: CAPE CORAL FL 33990

*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:** DAVE GONZALEZ

MANAGER

03/29/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date