

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000079541

**Entity Name:** CORTES' PROPERTY CARE SOLUTIONS LLC

**Current Principal Place of Business:**

1936 2ND ST SE  
MOULTIRE, GA 31768

**Current Mailing Address:**

1936 2ND ST SE  
MOULTRIE, GA 32407 US

**FEI Number:** 92-2471237

**Certificate of Status Desired:** Yes

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

CORTES, ANTHONY M MR.  
34 ACE HIGH LANE  
CRAWFORDVILLE, FL 32327 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           | CEO                   | Title           | CEO                |
| Name            | CORTES, ANTHONY M MR. | Name            | CORTES, ANN M MRS. |
| Address         | 1936 2ND ST SE        | Address         | 1936 2ND ST SE     |
| City-State-Zip: | MOULTRIE GA 32407     | City-State-Zip: | MOULTRIE GA 32407  |

*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:** ANTHONY M. CORTES

CEO

01/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date