

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000276411

**Entity Name:** FLAGLER IRRIGATION SOLUTIONS LLC

**Current Principal Place of Business:**

250 COUNTY ROAD 135 N  
BUNNELL, FL 32110

**Current Mailing Address:**

250 COUNTY ROAD 135 N  
BUNNELL, FL 32110 US

**FEI Number:** 93-1783270

**Certificate of Status Desired:** Yes

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

LOFTUS, TIMOTHY  
250 COUNTY ROAD 135 N  
BUNNELL, FL 32110 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 LOFTUS, TIMOTHY  
Address 250 COUNTY ROAD 135 N  
City-State-Zip: BUNNELL FL 32110

*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:** TIMOTHY LOFTUS

MR

04/28/2024

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

\_\_\_\_\_  
Date