

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000333220

**Entity Name:** FWMB SERVICES LLC

**Current Principal Place of Business:**

462 SW PORT SAINT LUCIE BLVD  
122  
PORT SAINT LUCIE, FL 34953

**Current Mailing Address:**

6080 NW RELIEF CT  
PORT SAINT LUCIE, FL 34983 US

**FEI Number:** 99-0522653

**Certificate of Status Desired:** Yes

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

FLUEGEL, CODY  
6080 NW RELIEF CT  
PORT SAINT LUCIE, FL 34983 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 FLUEGEL, CODY  
Address 6080 NW RELIEF CT  
City-State-Zip: PORT SAINT LUCIE FL 34983

*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:** CODY FLUEGEL

MGR

04/30/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date