

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000198447

**Entity Name:** SOUTH FLORIDA LOW VOLTAGE LLC

**Current Principal Place of Business:**

9410 LIVE OAK PL  
APT 307  
DAVIE, FL 33324

**Current Mailing Address:**

9410 LIVE OAK PL  
APT 307  
DAVIE, FL 33324 US

**FEI Number:** 99-2886460

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC  
7901 4TH ST N  
STE 300  
ST. PETERSBURG, FL 33702 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 AUTHORIZED MEMBER  
Name KAVALAUSKAS, ZACHARY  
Address 9410 LIVE OAK PLACE APT 307  
City-State-Zip: DAVIE FL 33324

Title AUTHORIZED MEMBER  
Name KAVALAUSKAS, ZACHARY  
Address 9410 LIVE OAK PLACE APT 307  
City-State-Zip: DAVIE FL 33324

*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:** ZACHARY KAVALAUSKAS

**MEMBER**

**03/27/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date