

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000353618

**Entity Name:** TURNING LEAF LAWN CARE, LLC

**Current Principal Place of Business:**

11037 NW 5TH AVE  
BRANFORD, FL 32008

**Current Mailing Address:**

11037 NW5TH AVE  
BRANFORD, FL 32008 US

**FEI Number: 85-3965612**

**Certificate of Status Desired: No**

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

SPRING, JENNIFER J  
11037 NW 5TH AVE  
BRANFORD, FL 32008 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 AMBR  
Name SPRING, JENNIFER J  
Address 11037 NW 5TH AVE  
City-State-Zip: BRANFORD FL 32008

Title AMBR  
Name SPRING, SHAUN A  
Address 11037 NW 5TH AVE  
City-State-Zip: BRANFORD FL 32008

Title AMBR  
Name SPRING, AUSTIN A  
Address 11037 NW 5TH AVE  
City-State-Zip: BRANFORD FL 32008

Title AMBR  
Name SPRING, RILEY A  
Address 11037 NW 5TH AVE  
City-State-Zip: BRANFORD FL 32008

*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: JENNIFER J SPRING**

**AMBR**

**04/01/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date