

Licensee Details

Licensee Information

Name: **POWELL, CHARLES M JR (Primary Name)**

POWELL AV LLC (DBA Name)

Main Address: **705 SW 29TH STREET
CAPE CORAL Florida 33914**

County: **LEE**

License Mailing:

LicenseLocation:

License Information

License Type: **Certified Specialty Contractor**

Rank: **Cert Specialty**

License Number: **ES12001664**

Status: **Current,Active**

Licensure Date: **07/25/2018**

Expires: **08/31/2020**

Special Qualifications **Qualification Effective**

**Limited Energy Systems
Specialty** **05/03/2017**

Alternate Names

[View Related License Information](#)

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2601 Blair Stone Road, Tallahassee FL 32399 :: Email: **Customer Contact Center** :: Customer Contact Center: 850.487.1395

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