| FEI Number: 20-8432439 | | | Certificate of Status Desi | red: Yes |
|--|--|-----------------|----------------------------|------------|
| Name and Address of Current Registered Agent: | | | | |
| KHOSROZADEH, BRUCE MGRM 5651 CROSSWINDS CT. ST. AUGUSTINE, FL 32092 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: BRUCE KHOSROZADEH | | | | 01/12/2023 |
| | Electronic Signature of Registered Agent | | | Date |
| Authorized Person(s) Detail : | | | | |
| Title | MGRM | Title | MGRM | |
| Name | KHOSROZADEH, BRUCE | Name | NASSER, ALI | |
| Address | 5651 CROSSWINDS CT. | Address | 2930 SE 31ST STREET | |
| City-State-Zip: | ST. AUGUSTINE FL 32092 | City-State-Zip: | OCALA FL 34471 | |

Current Mailing Address:

5651 CROSSWINDS CT. ST. AUGUSTINE, FL 32092 US

F

Ν

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: BRUCE KHOSROZADEH

MANAGER

01/12/2023 Date

Electronic Signature of Signing Authorized Person(s) Detail

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000016153

Entity Name: ABA & ASSOCIATES, LLC

Current Principal Place of Business:

5651 CROSSWINDS CT. ST. AUGUSTINE, FL 32092

Secretary of State 3954950458CC

FILED Jan 12, 2023