

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000122088

Entity Name: ABO, LLC

Current Principal Place of Business:

2106 NW 67TH PLACE, SUITE 5
GAINESVILLE, FL 32653-1658

Current Mailing Address:

P.O. BOX 141771
GAINESVILLE, FL 32614-1771

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONTEGA BUSINESS SERVICES, LLC
ONE INDEPENDENT DRIVE, SUITE 1200
JACKSONVILLE, FL 32202 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 MANAGER
Name LOMBARDERO, NADIA
Address P.O. BOX 141771
City-State-Zip: GAINESVILLE FL 32614-1771

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: NADIA LOMBARDERO

MANAGER

03/25/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date