

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000018951

**Entity Name:** ANF SERVICES LLC

**Current Principal Place of Business:**

7200 66TH ST N  
NATURE'S TABLE HEC  
ST PETERSBURG, FL 33781

**Current Mailing Address:**

P O BOX 47813  
ST PETERSBURG, FL 33743 US

**FEI Number:** 45-4502944

**Certificate of Status Desired:** No

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

FACKIH, SHADI N  
7200 66TH ST N  
NATURE'S TABLE HEC  
ST PETERSBURG, FL 33781 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 MGRM  
Name FACKIH, AMER N  
Address 7200 66TH ST N  
NATURE'S TABLE HEC  
City-State-Zip: ST PETERSBURG FL 33781

Title MGRM  
Name FACKIH, SAMER N  
Address 7200 66TH ST N  
NATURE'S TABLE HEC  
City-State-Zip: ST PETERSBURG FL 33781

*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:** SAMER N FACKIH

MGRM

02/27/2017

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date