

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000037793

**Entity Name:** ALLIED NP SERVICES LLC

**Current Principal Place of Business:**

410 NW 32 AVE  
MIAMI, FL 33125

**Current Mailing Address:**

410 NW 32 AVE  
MIAMI, FL 33125 US

**FEI Number:** 47-3284048

**Certificate of Status Desired:** No

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

LINARES, ALVIS J  
1898 SW 27 AVE  
1  
MIAMI, FL 33145 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:** ALVISLINARES

05/21/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title OTHER  
Name LINARES, ALVIS J  
Address 410 NW 32 AVE  
City-State-Zip: MIAMI FL 33125

*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:** ALVIS J LINARES

OTHER

05/21/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date