## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000037793

Entity Name: ALLIED NP SERVICES LLC

**Current Principal Place of Business:** 

70 NW 8 STREET HOMESTEAD. FL 33030

,

**Current Mailing Address:** 

15840 SW 283 STREET HOMESTEAD. FL 33033 US

FEI Number: 47-3284048 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LINARES, ALVIS J 15840 SW 283 STREET HOMESTEAD, FL 33033 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 04/03/2024

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title OTHER

Name LINARES, ALVIS J
Address 15840 SW 283 STREET
City-State-Zip: HOMESTEAD FL 33033

SIGNATURE: ALVIS J LINARES

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.

**OWNER** 

Electronic Signature of Signing Authorized Person(s) Detail

Date

04/03/2024

FILED Apr 03, 2024

**Secretary of State** 

0477031267CC

Date