

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000076918

**Entity Name:** ABX SERVICES LLC

**Current Principal Place of Business:**

6764 NW 182ND ST  
101  
HIALEAH, FL 33015

**Current Mailing Address:**

6764 NW 182ND ST  
101  
HIALEAH, FL 33015

**FEI Number:** 81-2325845

**Certificate of Status Desired:** No

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

BARRERA, ANGELICA  
6764 NW 182ND ST  
101  
HIALEAH, FL 33015 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 MGR  
Name BARRERA, ANGELICA  
Address 6764 NW 182ND ST APT 101  
City-State-Zip: HIALEAH FL 33015

Title MANAGER  
Name BARRERA, JUAN C  
Address 6764 NW 182ND ST  
101  
City-State-Zip: HIALEAH FL 33015

*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:** ANGELICA BARRERA

**MANAGER**

**07/01/2020**

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

\_\_\_\_\_  
Date