

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000094942

Entity Name: ATABEX US1 LLC

Current Principal Place of Business:

2170 W. STATE ROAD 434.
SUITE 350
LONGWOOD, FL 32779

Current Mailing Address:

2170 W. STATE ROAD 434.
SUITE 350
LONGWOOD, FL 32779 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TAX CARE, INC.
2170 W. STATE ROAD 434.
LONGWOOD, FL 32779 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: DANIEL ALVAREZ

03/02/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	AMBR	Title	AMBR
Name	LIMA, ORESTES	Name	HARB BORDA, CAMILA ANA MARIA
Address	2170 W. STATE ROAD 434 SUITE 350	Address	2170 W. STATE ROAD 434 SUITE 350
City-State-Zip:	LONGWOOD FL 32779	City-State-Zip:	LONGWOOD FL 32779

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: CAMILA ANA MARIA HARB BORDA

AMBR

03/02/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date