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.

MGRM

SIGNATURE: ANGELICA ANGON

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail :						
Title	AMBR	Title	AMBR			
Name	ANGON, OSIEL	Name	ANGON, ANGELICA			
Address	3009 WEST SAM ALLEN RD	Address	3009 WEST SAM ALLEN RD			
City-State-Zip:	PLANT CITY FL 33565	City-State-Zip:	PLANT CITY FL 33565			

2024 FLORIDA LIMITED	LIABILITY	COMPANY	ANNUAL	REPORT

DOCUMENT# L17000228286

Entity Name: ANGON CONSTRUCTION SERVICES, LLC

Current Principal Place of Business:

3009 WEST SAM ALLEN RD PLANT CITY, FL 33565

Current Mailing Address:

3009 WEST SAM ALLEN RD PLANT CITY, FL 33565 US

FEI Number: 82-4587608

Name and Address of Current Registered Agent:

ANGON, MARIA A 3009 WEST SAM PLANT CITY, FL	ALLEN RD			
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:	MARIA ANGELICA ANGON	05/01/2024		
	Electronic Signature of Registered Agent	Date		

Αι

	AWDI	The	AWDR
ame	ANGON, OSIEL	Name	ANGON, ANGELICA
dress	3009 WEST SAM ALLEN RD	Address	3009 WEST SAM ALLEN RD
ty-State-Zip:	PLANT CITY FL 33565	City-State-Zip:	PLANT CITY FL 33565

FILED May 01, 2024 Secretary of State 5457479952CC

Certificate of Status Desired: No

05/01/2024

Date