

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000102649

**Entity Name:** ALL LOCATE SOLUTIONS, LLC.

**Current Principal Place of Business:**

10 GABLES BLVD.  
WESTON, FL 33326

**Current Mailing Address:**

10 GABLES BLVD.  
WESTON, FL 33326

**FEI Number:** 82-5387061

**Certificate of Status Desired:** No

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

CARBONELL, RAUL  
10 GABLES BLVD.  
WESTON, FL 33326 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 P  
Name CARBONELL, RAUL  
Address 10 GABLES BLVD.  
City-State-Zip: WESTON FL 33326

Title S  
Name CARBONELL, MELISSA G  
Address 10 GABLES BLVD.  
City-State-Zip: WESTON FL 33326

*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:** RAUL CARBONELL

**PRESIDENT**

**04/01/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date