FEI Number: 86-2487270		Certificate of Status Desired: No		
Name and A	Address of Current Registered Age	nt:		
LEWIS, LINDA 4520 IDLEWOO PENSACOLA, I				
The above name	d entity submits this statement for the purpose of ch	anging its registered office or regis	tered agent, or both, in the State of	Florida.
SIGNATURE	E: LINDA LEWIS			04/28/2022
SIGNATURE	E: LINDA LEWIS Electronic Signature of Registered Agent			04/28/2022 Date
	Electronic Signature of Registered Agent	Title	MGR	
Authorized	Electronic Signature of Registered Agent Person(s) Detail :	Title Name	MGR JOHNSON, LUKE	04/28/2022 Date
Authorized	Electronic Signature of Registered Agent Person(s) Detail : AMBR		-	

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: VONTERIEZ EVANS

AMBR

04/28/2022

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000210544

Entity Name: ASSETS OVER LIABILITIES LLC

Current Principal Place of Business:

4520 IDLEWOOD DR PENSACOLA, FL 32506

Current Mailing Address:

4520 IDLEWOOD DR PENSACOLA, FL 32506 US

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 28, 2022 Secretary of State 1966532166CC

Date