

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000005921

**Entity Name:** KB AG SOLUTIONS LLC

**Current Principal Place of Business:**

15217 HUCKLEBERRY RD  
WIMAUMA, FL 33598

**Current Mailing Address:**

PO BOX 282  
BALM, FL 33503

**FEI Number:** 86-1741577

**Certificate of Status Desired:** No

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

SHOOP, BRIAN L  
15217 HUCKLEBERRY RD  
WIMAUMA, FL 33598 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	Title	MGR
Name	SHOOP, BRIAN L	Name	SHOOP, KELLY
Address	PO BOX 282	Address	PO BOX 282
City-State-Zip:	BALM FL 33503	City-State-Zip:	BALM FL 33503

*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:** SHOOP , BRIAN L

**MGR**

**01/26/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date