

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000271748

Entity Name: ASSURED BOOKKEEPING PLUS, LLC

Current Principal Place of Business:

1631 DEL PRADO BLVD S STE 300#1023
CAPE CORAL, FL 33990

Current Mailing Address:

1631 DEL PRADO BLVD S STE 300#1023
CAPE CORAL, FL 33990

FEI Number: 88-0947953

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAMIREZ, STEPHANIE M
1631 DEL PRADO BLVD S STE 300#1023
CAPE CORAL, FL 33990 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
Name RAMIREZ, STEPHANIE M
Address 1631 DEL PRADO BLVD S STE
300#1023
City-State-Zip: CAPE CORAL FL 33990

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: RAMIREZ, STEPHANIE M

MANAGER

02/15/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date