

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000321941

**Entity Name:** AABO HOME LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

100 S ASHLEY DR  
TAMPA, FL 33602

**Current Mailing Address:**

100 S ASHLEY DR  
TAMPA, FL 33602 US

**FEI Number:** 86-1961485

**Certificate of Status Desired:** No

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

STAHLE, MATTHEW  
14107 INDIGO RIDGE LN  
LITHIA, FL 33547 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            AMBR  
Name            STAHLE, MATTHEW  
Address        14107 INDIGO RIDGE LN  
City-State-Zip: LITHIA FL 33547

Title            AMBR  
Name            STAHLE, MICHAEL  
Address        4795 MILE HIGH DR  
City-State-Zip: SLC UT 84124

*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:** MATTHEW STAHLE

AMBR

04/22/2025

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date