

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000447928

**Entity Name:** ABBIE CARES LLC

**Current Principal Place of Business:**

5445 MURRELL ROAD  
UNIT 102 #163  
VIERA, FL 32955

**Current Mailing Address:**

5445 MURRELL ROAD  
UNIT 102 #163  
VIERA, FL 32955 US

**FEI Number:** 92-0656106

**Certificate of Status Desired:** No

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

RUDOLPH, ABIGAIL G  
5445 MURRELL ROAD  
UNIT 102, #163  
VIERA, FL 32955 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 AP  
Name RUDOLPH, ABIGAIL G  
Address 5445 MURRELL ROAD UNIT 102 #163  
City-State-Zip: VIERA FL 32955

*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:** ABIGAIL RUDOLPH

**AUTHORIZED MEMBER**

**04/30/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date