

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000475698

**Entity Name:** AX CONSULTING LLC

**Current Principal Place of Business:**

4530 S ORANGE BLOSSOM TRAIL STE 914  
ORLANDO, FL 32839

**Current Mailing Address:**

4530 S ORANGE BLOSSOM TRAIL STE 914  
ORLANDO, FL 32839

**FEI Number:** 88-4257807

**Certificate of Status Desired:** No

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

LEGALCORP SOLUTIONS, LLC  
3440 W HOLLYWOOD BLVD. SUITE 415  
HOLLYWOOD, FL 33021 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            CAMPBELL, ALEX  
Address        4530 S ORANGE BLOSSOM TRAIL  
                  STE 914  
City-State-Zip: ORLANDO FL 32839

*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:** ALEX CAMPBELL

**OWNER**

**04/30/2023**

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

\_\_\_\_\_  
Date