

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000018130

**Entity Name:** AMB OUTSOURCING SERVICES, LLC

**Current Principal Place of Business:**

4921 HISPANIOLA ST  
APT 1  
PANAMA CITY BEACH, FL 32408

**Current Mailing Address:**

4921 HISPANIOLA ST  
APT 1  
PANAMA CITY BEACH, FL 32408 US

**FEI Number:** 42-1699761

**Certificate of Status Desired:** No

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

BURNETT, ANNA M  
1118 TEXAS AVE  
LYNN HAVEN, FL 32444 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	MGM
Name	BURNETT, ANNA M	Name	BURNETT, MICHAEL D
Address	1118 TEXAS AVE	Address	712 JJ DRIVE
City-State-Zip:	LYNN HAVEN FL 32444	City-State-Zip:	PANAMA CITY FL 32401

*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:** ANNA BURNETT

**MGM**

**04/01/2015**

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

\_\_\_\_\_  
Date