

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000019977

**Entity Name:** A&B ACCOUNTING AND BUSINESS SOLUTIONS, LLC.

**Current Principal Place of Business:**

1761 W HILLSBORO BLVD  
SUITE 403  
DEERFIELD BEACH, FL 33442

**Current Mailing Address:**

1761 W HILLSBORO BLVD  
SUITE 403  
DEERFIELD BEACH, FL 33442 US

**FEI Number:** 80-0786344

**Certificate of Status Desired:** No

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

BROWN, ALICIA M  
1761 W HILLSBORO BLVD  
SUITE 403  
DEERFIELD BEACH, FL 33442 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 MGRM  
Name BROWN, ALICIA M  
Address 1761 W HILLSBORO BLVD, SUITE 403  
403  
City-State-Zip: DEERFIELD BEACH FL 33442

Title AUTHORIZED MEMBER  
Name BROWN, WILLIAM  
Address 1761 W HILLSBORO BLVD SUITE 403  
403  
City-State-Zip: DEERFIELD BEACH FL 33442

*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:** ALICIA BROWN

**PRESIDENT**

**05/19/2020**

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

\_\_\_\_\_  
Date