

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000059147

**Entity Name:** ONYX PROTECTIVE SERVICES, LLC

**Current Principal Place of Business:**

870 NW 173RD TERRACE  
MIAMI, FL 33169

**Current Mailing Address:**

2350 NORTH UNIVERSITY DRIVE  
UNIT #849026  
PEMBROKE PINES, FL 33084 US

**FEI Number:** 46-5623716

**Certificate of Status Desired:** No

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

NEEDELMAN, JAY M CPA  
520 WEST 47TH STREET  
MIAMI BEACH, FL 33140 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:** JAY NEEDELMAN

04/16/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           FELIX, ROBERT  
Address        6639 LIBERTY STREET  
City-State-Zip: HOLLYWOOD FL 33024

*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:** ROBERT FELIX

MANAGER

04/16/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date