

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000132216

**Entity Name:** AGON CONSULTING SERVICES LLC

**Current Principal Place of Business:**

6039 CYPRESS GARDENS BLVD  
SUITE 263  
WINTER HAVEN, FL 33884

**Current Mailing Address:**

481 MOUNTAIN TOP DR  
BLUE RIDGE, GA 30513 US

**FEI Number:** 81-3222329

**Certificate of Status Desired:** No

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

WALPOLE, FRANK  
6039 CYPRESS GARDENS BLVD  
SUITE 263  
WINTER HAVEN, FL 33884 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:** FRANK WALPOLE

01/17/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name WALPOLE, FRANK  
Address 6039 CYPRESS GARDENS BLVD  
SUITE 263  
City-State-Zip: WINTER HAVEN FL 33884

*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:** FRANK WALPOLE

MGR

01/17/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date