

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000047706

**Entity Name:** ABEL HANDYMAN SERVICE, LLC

**Current Principal Place of Business:**

4239 WALTON BRIDGE ROAD  
PONCE DE LEON, FL 32455

**Current Mailing Address:**

4239 WALTON BRIDGE ROAD  
PONCE DE LEON, FL 32455 US

**FEI Number:** 82-1006550

**Certificate of Status Desired:** No

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

MARTIN, TONY  
3929 WALTON BRIDGE ROAD  
PONCE DE LEON, FL 32455 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            ABEL, RICHARD  
Address        4239 WALTON BRIDGE ROAD  
City-State-Zip: PONCE DE LEON FL 32455

*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:** ABEL, RICHARD

AMBR

02/23/2023

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

\_\_\_\_\_ Date