

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000370671

**Entity Name:** A. WELKEPT MACHINERY SERVICE LLC**Current Principal Place of Business:**213 NW 1ST AVENUE  
HALLANDALE, FL 33009**Current Mailing Address:**213 NW 1ST AVENUE  
HALLANDALE, FL 33009**FEI Number:** 86-1940783**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WATSON, NASWELL  
213 NW 1ST AVENUE  
HALLANDALE, FL 33009 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
Name	WATSON, NASWELL
Address	213 NW 1ST AVENUE
City-State-Zip:	HALLANDALE FL 33009

Title	AMBR
Name	WATSON, NASWELL
Address	213 NW 1ST AVENUE
City-State-Zip:	HALLANDALE FL 33009

Title	AP
Name	ARTEAGA, DANERY
Address	213 NW 1ST AVENUE
City-State-Zip:	HALLANDALE FL 33009

Title	AP
Name	BETTON, RUDOLPH
Address	213 NW 1ST AVENUE
City-State-Zip:	HALLANDALE FL 33009

*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:** NASWELL WATSON

MGR

04/12/2021

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