

**2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L22000535057

**Entity Name:** ALL HAZARDS CONSULTING SERVICES LLC

**Current Principal Place of Business:**

5240 LAKEHURST CT  
PALMETTO, FL 34221

**Current Mailing Address:**

5240 LAKEHURST CT  
PALMETTO, FL 34221 US

**FEI Number:** 92-2313065

**Certificate of Status Desired:** No

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

BAKER, BRIANNE  
5240 LAKEHURST CT  
PALMETTO, FL 34221 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           MANAGER  
Name           BAKER, BRIANNE  
Address        5240 LAKEHURST CT  
City-State-Zip: PALMETTO FL 34221

*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:** BRIANNE BAKER

**REGISTERED AGENT**

**12/20/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date