

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000479018

**Entity Name:** CROWN SERVICES LLC

**Current Principal Place of Business:**

2890 S US HWY 17 92  
CASSELBERRY, FL 32707

**Current Mailing Address:**

2890 S US HWY 17 92  
CASSELBERRY, FL 32707

**FEI Number:** 33-1910552

**Certificate of Status Desired:** No

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

ASPAROUHOV, OGNIAN  
2890 S US HWY 17 92  
CASSELBERRY, FL 32707 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:** OGNIAN ASPAROUHOV

01/03/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name            ASPAROUHOV, OGNIAN  
Address         2890 S US HWY 17 92  
City-State-Zip: CASSELBERRY FL 32707

Title            AUTHORIZED MEMBER  
Name            KONNEX CORP  
Address         1711 AMAZING WAY STE 213  
City-State-Zip: OCOEE FL 34761

*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:** OGNIAN ASPAROUHOV

MANAGER

01/03/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date