

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000281552

**Entity Name:** ABALLAVATE LLC

**Current Principal Place of Business:**

6670 ESTERO BLVD  
A303  
FORT MYERS BEACH, FL 33931

**Current Mailing Address:**

3 NEW ENGLAND WAY  
LINCOLN, RI 02865

**FEI Number:** 88-2960860

**Certificate of Status Desired:** No

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

URBANCIC, GREGORY L  
4001 TAMiami TRAIL NORTH, SUITE 300  
NAPLES, FL 34103 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 LYONS, TIMOTHY J  
Address 3 NEW ENGLAND WAY  
City-State-Zip: LINCOLN RI 02865

*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:** TIMOTHY LYONS

**MEMBER**

**03/14/2024**

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

\_\_\_\_\_  
Date