

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000008484

**Entity Name:** BREAKINGPOINT, LLC

**Current Principal Place of Business:**

1060 BRICKELL AVE  
#4205  
MIAMI, FL 33131

**FILED**  
**Feb 23, 2023**  
**Secretary of State**  
**6776765963CC**

**Current Mailing Address:**

1060 BRICKELL AVE  
#4205  
MIAMI, FL 33131 US

**FEI Number:** 34-2031725

**Certificate of Status Desired:** No

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

MANNARINO, SERGIO  
1060 BRICKELL AVE  
#4205  
MIAMI, FL 33131 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 MGRM  
Name THE GHYARA FAMILY TRUST  
Address 10583 BEECH CREEK STREET  
City-State-Zip: LAS VEGAS NV 89141

Title MGRM  
Name IVEY, MITCHEL  
Address 2099 STEWART LN  
City-State-Zip: LOUISVILLE TN 37777

Title MGRM  
Name SERGIO MANNARINO TRUST DATED  
1/2/2018  
Address 1060 BRICKELL AVE #4205  
City-State-Zip: MIAMI FL 33131

*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:** SERGIO MANNARINO

**MANAGING MEMBER**

**02/23/2023**

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

\_\_\_\_\_  
Date