

2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L10000047706

Entity Name: THOI DAI 1, LLC**Current Principal Place of Business:**529 E CHURCH AVE
LONGWOOD, FL 32750**Current Mailing Address:**529 E CHURCH AVE
LONGWOOD, FL 32750 US**FEI Number:** 27-2857044**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NGUYEN, PHU
529 E CHURCH AVE
LONGWOOD, FL 32750 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	NGUYEN, YEN
Address	107 E. MELBOURNE AVENUE
City-State-Zip:	SILVER SPRING MD 20901

Title	MGRM
Name	NGUYEN, PHU
Address	529 E CHURCH AVE
City-State-Zip:	LONGWOOD FL 32750

Title	AUTHORIZED MEMBER
Name	VU, DINH THU
Address	529 E CHURCH AVE
City-State-Zip:	LONGWOOD FL 32750

Title	MANAGER MEMBER
Name	NGUYEN, WILLIAM VU
Address	529 E CHURCH AVE
City-State-Zip:	LONGWOOD FL 32750

Title	MANAGER MEMBER
Name	NGUYEN, PHOUC TANG
Address	107 E MELBOURNE AVE
City-State-Zip:	SILVER SPRINGS MD 20901

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: PHU TANG NGUYEN**MANAGER****11/15/2023**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date