2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000042994

Entity Name: FULCRUM, LLC

Current Principal Place of Business:

5901 US HWY 19 SUITE 7 NEW PORT RICHEY, FL 34652

Current Mailing Address:

5901 US HWY 19 SUITE 7 NEW PORT RICHEY, FL 34652 US

FEI Number: 46-5144369

Name and Address of Current Registered Agent:

BURNARD, HARRY 5901 US HWY 19 SUITE 7 NEW PORT RICHEY, FL 34652 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

| Authorized | Person(s | b) Detail : |
|--------------|------------|-------------------|
| Additionized | 1 010011(0 | <i>y</i> Detail . |

| Authorized Terson(s) Detail. | | | | |
|------------------------------|--------------------------|-----------------|--------------------------|--|
| Title | MGR | Title | MGR | |
| Name | BURNARD, HARRY | Name | BURNARD, MARY A | |
| Address | 5901 US HWY. 19, SUITE 7 | Address | 5901 US HWY. 19, SUITE 7 | |
| City-State-Zip: | NEW PORT RICHEY FL 34652 | City-State-Zip: | NEW PORT RICHEY FL 34652 | |

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.

MGR

SIGNATURE: MARY A BURNARD

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 28, 2024 Secretary of State 4395328527CC

Certificate of Status Desired: No

03/28/2024

Date