2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 12, 2020
Secretary of State
9785117354CC

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Entity Name: THRIVE INSURANCE & FINANCIAL SERVICES, LLC

Current Principal Place of Business:

709 S A ST
LAKE WORTH, FL 33460

Current Mailing Address:

709 S A ST
LAKE WORTH, FL 33460 US

FEI Number: 47-3661145

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PROPHETE, KARLINE S
709 S A ST
LAKE WORTH, FL 33460 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	REGIS, JOVENEL
Address	709 S A ST
City-State-Zip:	LAKE WORTH FL 33460

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: JOVENEL REGIS MGR 01/12/2020

Electronic Signature of Signing Authorized Person(s) Detail — Date