

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000143150

**Entity Name:** THRIVELIGHT LLC

**Current Principal Place of Business:**

5892 SW 112TH TER  
COOPER CITY, FL 33330

**Current Mailing Address:**

5892 SW 112TH TER  
COOPER CITY, FL 33330 UN

**FEI Number: 81-3544810**

**Certificate of Status Desired: Yes**

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

ALMEYDA, ORESTES  
5892 SW 112TH TER  
COOPER CITY, FL 33330 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 ALMEYDA, ORESTES  
Address 5892 SW 112TH TER  
City-State-Zip: COOPER CITY FL 33330

Title AR  
Name ATANCE, RAQUEL  
Address 5892 SW 112TH TER  
City-State-Zip: COOPER CITY FL 33330

Title AR  
Name ALMEYDA, MIGUEL  
Address 5892 SW 112TH TER  
City-State-Zip: COOPER CITY FL 33330

Title AR  
Name ALMEYDA, ALEJANDRO  
Address 5892 SW 112TH TER  
City-State-Zip: COOPER CITY FL 33330

*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: ORESTES ALMEYDA**

**MANAGER**

**03/11/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date