

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000211686

**Entity Name:** A HARROWING ESCAPE LLC.

**Current Principal Place of Business:**

1502 N. SEMORAN BLVD.,  
SUITE 160  
ORLANDO, FL 32807

**Current Mailing Address:**

1502 N. SEMORAN BLVD.,  
SUITE 160  
ORLANDO, FL 32807 US

**FEI Number:** 81-4487614

**Certificate of Status Desired:** No

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

EDWARDS, TROY A  
3842 RUNNING WATER DR.  
ORLANDO, FL 32829 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           | AMBR                   | Title           | AMBR                   |
| Name            | EDWARDS, TROY A        | Name            | EDWARDS, TANYA L       |
| Address         | 3842 RUNNING WATER DR. | Address         | 3842 RUNNING WATER DR. |
| City-State-Zip: | ORLANDO FL 32829       | City-State-Zip: | ORLANDO FL 32829       |

*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:** TROY EDWARDS

AMBR

01/23/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date