

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000138627

Entity Name: THRIVE OFF PRESSURE SALES & SERVICES LLC

Current Principal Place of Business:

532 N RYAN AVE
APOPKA, FL 32712

Current Mailing Address:

532 N RYAN AVE
APOPKA, FL 32712 US

FEI Number: 83-0827359

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BATEMAN, MICHAEL
532 N RYAN AVE
APOPKA, FL 32712 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 PRES
Name BATEMAN, MICHAEL
Address 532 N RYAN AVE
City-State-Zip: APOPKA FL 32712

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: MICHAEL BATEMAN

PRESIDENT

03/04/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date