

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000192289

Entity Name: THOMPSON SALINAS LLC**Current Principal Place of Business:**5260 MOUNT PLYMOUTH RD
APOPKA, FL 32712**Current Mailing Address:**5260 MOUNT PLYMOUTH RD
APOPKA, FL 32712**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GALVAN, ELVIA
5260 MOUNT PLYMOUTH RD
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	MBR
Name	GALVAN, ELVIA
Address	5260 MOUNT PLYMOUTH RD
City-State-Zip:	APOPKA FL 32712

Title	MBR
Name	MAZARIEGOS-GALVAN, JONATHAN
Address	5260 MOUNT PLYMOUTH RD
City-State-Zip:	APOPKA FL 32712

Title	MBR
Name	MAGA INVESTOR LLC
Address	560 SWALLOW CT
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: ELVIA GALVAN

MBR

07/11/2023

Electronic Signature of Signing Authorized Person(s) Detail_____
Date