## **2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000225188

Entity Name: POWER PROVIDER SERVICES LLC

**Current Principal Place of Business:** 

457 MAUDEHELEN ST APOPKA, FL 32703

**Current Mailing Address:** 

457 MAUDEHELEN ST APOPKA. FL 32703

FEI Number: 84-3081220 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ALONSO HERNANDEZ, JUAN 457 MAUDEHELEN ST APOPKA, FL 32703 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

FILED Mar 24, 2021

**Secretary of State** 

1608279855CC

## Authorized Person(s) Detail:

Title MGR

Name ALONSO HERNANDEZ, JUAN

Address 457 MAUDEHELEN ST
City-State-Zip: APOPKA FL 32703

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: JUAN ALONSO HERNANDEZ

**MANAGER** 

03/24/2021