

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000252783

**Entity Name:** THRIVE SOLUTIONS TEAM LLC

**Current Principal Place of Business:**

10174 RIDGEBLOOM AVE  
ORLANDO, FL 32829

**Current Mailing Address:**

10174 RIDGEBLOOM AVE  
ORLANDO, FL 32829 UN

**FEI Number: 84-5108917**

**Certificate of Status Desired: No**

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

DIEPPA, LAURIE  
10174 RIDGEBLOOM AVE  
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 MGR  
Name DIEPPA, LAURIE  
Address 10174 RIDGEBLOOM AVE  
City-State-Zip: ORLANDO FL 32829

Title MGR  
Name RIVERA, BRENDA LIZ  
Address 10174 RIDGEBLOOM AVENUE  
City-State-Zip: ORLANDO FL 32829

Title MANAGER  
Name ORTIZ, JUAN SEBASTIAN  
Address 10174 RIDGEBLOOM AVE  
City-State-Zip: ORLANDO 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: LAURIE DIEPPA**

**MANAGER**

**04/29/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date