

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000194115

**Entity Name:** 6PS INVESTORS LLC**Current Principal Place of Business:**19186 NW 33CT  
MIAMI GARDEN, FL 33056**Current Mailing Address:**19186 NW 33CT  
MIAMI GARDEN, FL 33056 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**POWELL, MAURICE  
19186 NW 33CT  
MIAMI GARDEN, FL 33056 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  
Name POWELL, MAURICE  
Address 19186 NW 33CT  
City-State-Zip: MIAMI GARDEN FL 33056

Title AMBR  
Name HOFFMANNPOWELL, JUTTA  
Address 2622 MADISON ST  
City-State-Zip: HOLLYWOOD FL 33020

Title AMBR  
Name POWELL, SONJA  
Address 2622 MADISON ST  
City-State-Zip: HOLLYWOOD FL 33020

Title AMBR  
Name POWELL, XENIA  
Address 2622 MADISON  
City-State-Zip: HOLLYWOOD FL 33020

Title AMBR  
Name POWELL, TESSA  
Address 2622 MADISON  
City-State-Zip: HOLLYWOOD FL 33020

Title AMBR  
Name POWELL, FABIO  
Address 2622 MADISON  
City-State-Zip: HOLLYWOOD FL 33020

*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:** MAURICE W POWELL

PRESIDENT

04/26/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date