

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000511106

**Entity Name:** HUB ENERGY LLC

**Current Principal Place of Business:**

2090 OLD HICKORY TREE RD  
STE 104  
ST CLOUD, FL 34772

**Current Mailing Address:**

2090 OLD HICKORY TREE RD  
STE 104  
ST CLOUD, FL 34772 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MORALES, FELIX  
2090 OLD HICKORY TREE RD  
STE 104  
ST CLOUD, FL 34772 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 MORALES, FELIX  
Address 2090 OLD HICKORY TREE RD STE 104  
City-State-Zip: ST CLOUD FL 34772

Title MGR  
Name DIAZ, GABRIEL  
Address 2090 OLD HICKORY TREE RD STE 104  
City-State-Zip: ST CLOUD FL 34772

Title MGR  
Name GONZALEZ, VICTOR  
Address 2090 OLD HICKORY TREE RD STE 104  
City-State-Zip: ST CLOUD FL 34772

*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:** VICTOR GONZALEZ

MGR

04/12/2023

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

\_\_\_\_\_  
Date