

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000286977

**Entity Name:** GET UP FOR YOU LLC

**Current Principal Place of Business:**

5827 NORTHWEST BATES AVENUE  
PORT ST. LUCIE, FL 34986

**Current Mailing Address:**

5827 NORTHWEST BATES AVENUE  
PORT ST. LUCIE, FL 34986 US

**FEI Number:** 93-1912963

**Certificate of Status Desired:** No

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

PIERRE-LOUIS, ARTHUR  
5827 NORTHWEST BATES AVENUE  
PORT ST. LUCIE, FL 34986 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            PRESIDENT  
Name            PIERRE-LOUIS, ARTHUR  
Address        5827 NORTHWEST BATES AVENUE  
City-State-Zip: PORT ST. LUCIE FL 34986

Title            CEO  
Name            ALDAHAN, ABDULLAH  
Address        5827 NW BATES AVE  
City-State-Zip: PORT ST LUCIE FL 34986

Title            TREASURER  
Name            PIERRE-LOUIS, MARC GERARD  
Address        5827 NW BATES AVE  
City-State-Zip: PORT ST LUCIE FL 34986

*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:** ARTHUR PIERRE-LOUIS

**PRESIDENT**

**03/11/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date