

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000004140

Entity Name: SURE POWER CONSULTING, LLC

Current Principal Place of Business:

925 NORTH POINT PKWY
SUITE 140
ALPHARETTA, GA 30005

Current Mailing Address:

925 NORTH POINT PKWY
SUITE 140
ALPHARETTA, GA 30005 US

FEI Number: 26-3831086

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 NORTH CALHOUN ST.
SUITE 4
TALLAHASSEE, FL 32301 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 MANAGING PARTNER
Name SUTTON, STEVE
Address 925 NORTH POINT PKWY
 SUITE 140
City-State-Zip: ALPHARETTA GA 30005

Title CEO
Name SOMERVILLE, DEREK
Address 925 NORTH POINT PKWY
 SUITE 140
City-State-Zip: ALPHARETTA GA 30005

Title CONTROLLER
Name KIRCHNER, JOHN
Address 925 NORTH POINT PKWY
 SUITE 140
City-State-Zip: ALPHARETTA, GA 30005

Title VP
Name PAGE, JIM
Address 925 NORTH POINT PKWY
 SUITE 140
City-State-Zip: ALPHARETTA GA 30005

Title MEMBER
Name SOMERVILLE, DEREK
Address 925 NORTH POINT PKWY
 SUITE 140
City-State-Zip: ALPHARETTA GA 30005

Title MEMBER
Name SUTTON, STEVE
Address 925 NORTH POINT PKWY
 SUITE 140
City-State-Zip: ALPHARETTA GA 30005

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: DEREK SOMERVILLE

MEMBER

04/26/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date