

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1500009660

Entity Name: BREAKTHRU SUNBELT, LLC

Current Principal Place of Business:

60 EAST 42ND STREET, SUITE 1915
NEW YORK, NY 10165

Current Mailing Address:

60 EAST 42ND STREET, SUITE 1915
NEW YORK, NY 10165 US

FEI Number: 81-0686391

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 MERINOFF, CHARLES
Address 4980 WINDHAM HILL RD
City-State-Zip: WINDHAM VT 05359

Title MGR
Name CRISSES, ANDREW M
Address 8 COW LANE
City-State-Zip: KINGS POINT NY 11024

Title MGR
Name ONUFRYCHUK, JACOB PAUL
Address 145 JUDSON AVENUE
City-State-Zip: DOBBS FERRY NY 10522

Title MGR
Name ONUFRYCHUK, BRIAN D
Address 2117 WHIPPOORWILL ROAD
City-State-Zip: VIENNA VA 22181

Title MGR
Name DAVOLIO, JOSEPH F
Address 2039 CHESAPEAKE RD
City-State-Zip: ANNAPOLIS MD 21409

Title MGR
Name STONE, CHAD M
Address 18 CORNWELLS BEACH ROAD
City-State-Zip: SANDS POINT NY 11050

Title MGR
Name WIRTZ, DANIEL R
Address 2039 WEST CORTEZ ST
City-State-Zip: CHICAGO IL 60622

Title MGR
Name WIRTZ, ARTHUR M
Address 3 HENNEBERRY LANE
City-State-Zip: GOLF IL 60029

Continues on page 2

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: CHARLES MERINOFF

**AUTHORIZED
REPRESENTATIVE**

02/28/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title MGR
Name MILLER, JOHN A
Address 1235 WESTMOOR
City-State-Zip: WINNETKA IL 60093

Title MANAGER
Name WIRTZ, HILLARY WHISTON
Address 932 LAKE AVENUE
City-State-Zip: WILMETTE IL 60091

Title MGR
Name JONES, JILL ACKERMAN
Address 7801 CUNNINGHAM SARLES ROAD
City-State-Zip: BORDEN IN 47106

Title MANAGER
Name KEYES, MICHAEL JOSEPH
Address 9002 HURSTBOURNE CLUB LANE
City-State-Zip: LOUISVILLE KY 40222