

**2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L03000055465

**Entity Name:** TERMPROVIDER FINANCIAL SERVICES, LLC

**Current Principal Place of Business:**

348 SW MIRACLE STRIP PARKWAY  
SUITE 3A  
FT. WALTON BEACH, FL 32548

**Current Mailing Address:**

348 SW MIRACLE STRIP PARKWAY  
SUITE 3A  
FT. WALTON BEACH, FL 32548

**FEI Number:** 20-0523207

**Certificate of Status Desired:** No

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

PAULZAK, MARIE-JOSEE A  
171 ELDREDGE RD  
FORT WALTON BEACH, FL 32547 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:** MARIE-JOSEE A PAULZAK

05/14/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name PAULZAK, GARY MICHAEL  
Address 348 SW MIRACLE STRIP PARKWAY  
SUITE 3A  
City-State-Zip: FT. WALTON BEACH FL 32548

Title MGRM  
Name PAULZAK, MARIE-JOSEE AGNES  
Address 348 SW MIRACLE STRIP PARKWAY  
SUITE 3 A  
City-State-Zip: FT. WALTON BEACH FL 32548

*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:** MARIE-JOSEE AGNES PAULZAK

MGRM

05/14/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date