

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000029705

Entity Name: ARISE CENTER, LLC

Current Principal Place of Business:

3486 SW ELLIS STREET
PORT ST LUCIE, FL 34953

Current Mailing Address:

3486 SW ELLIS ST
PORT ST LUCIE, FL 34953 US

FEI Number: 35-2378811

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEJOIE, NATALIE N
3486 SW ELLIS ST
PORT ST LUCIE, FL 34953 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 PDIR
Name DEJOIE, JOSEPH R
Address 1417 SW PATRICIA AVE
City-State-Zip: PORT ST LUCIE FL 34953

Title MANAGER
Name TELEMAQUE, MEDJI
Address 3934 SW BRUNSWICK STREET
City-State-Zip: PORT ST LUCIE FL 34953

Title DIR
Name DEJOIE, NATALIE N
Address 1417 SW PATRICIA AVE
City-State-Zip: PORT ST LUCIE FL 34953

Title AUTHORIZED MEMBER
Name DEJOIE, ROMMEL
Address 1417 SW PATRICIA 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: NATALIE DEJOIE

DIRECTOR/PART OWNER 02/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date