

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000123118

**Entity Name:** RAISE 'EM APPAREL LLC

**Current Principal Place of Business:**

187 WORLEY WAY  
1841  
HAWTHORNE, FL 32640

**Current Mailing Address:**

PO BOX 1841  
HAWTHORNE, FL 32640

**FEI Number:** 81-3135588

**Certificate of Status Desired:** No

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

WORLEY, CODY A  
187 WORLEY WAY  
1841  
HAWTHORNE, FL 32640 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 WORLEY, CODY A  
Address 187 WORLEY WAY  
City-State-Zip: HAWTHORNE FL 32640

Title MGR  
Name WORLEY, CHELSIE E  
Address 187 WORLEY WAY  
City-State-Zip: HAWTHORNE FL 32640

*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:** CODY WORLEY

**MGR**

**04/03/2025**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date