

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000130104

Entity Name: SUNRISE POOL CARE, LLC

Current Principal Place of Business:

17118 GATHERING PLACE CIRCLE
CLERMONT, FL 34711

Current Mailing Address:

17118 GATHERING PLACE CIRCLE
CLERMONT, FL 34711 US

FEI Number: 61-1798792

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

VINICIUS DE ARAUJO SILVA
17118 GATHERING PLACE CIRCLE
CLERMONT, FL 34711 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: MGRM

04/08/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name SILVA, VINICIUS DE ARAUJO
Address 17118 GATHERING PLACE CIRCLE
City-State-Zip: CLERMONT FL 34711

Title MGR
Name DOS SANTOS, VIVIAN DE ARAUJO
 SILVA
Address 17118 GATHERING PLACE CIRCLE
City-State-Zip: CLERMONT FL 34711

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: VIVIAN DE ARAUJO SILVA DOS SANTOS

MGR

04/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date