

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000019462

**Entity Name:** EL PROPERTY CARE MIGHT, STRENGTH, AND POWER L.L.C.

**Current Principal Place of Business:**

979 HEARTSIDE RUN  
TALLAHASSEE, FL 32317

**Current Mailing Address:**

PO BOX 21012  
TALLAHASSEE, FL 32304 US

**FEI Number: 82-3967426**

**Certificate of Status Desired: No**

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

RAY, EMMANUEL SR.  
979 HEARTSIDE RUN  
TALLAHASSEE, FL 32317 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:** EMMANUEL RAY

09/04/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	AP
Name	RAY, EMMANUEL	Name	RAY, EMMANUEL
Address	PO BOX 21012	Address	PO BOX 21012
City-State-Zip:	TALLAHASSEE FL 32304	City-State-Zip:	TALLAHASSEE FL 32304

*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:** EMMANUEL RAY

MGR

09/04/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date