

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000123142

**Entity Name:** HENRYFUN, LLC

**Current Principal Place of Business:**

2815 DIRECTORS ROW  
STE 100 OFFICE 538  
ORLANDO, FL 32809

**Current Mailing Address:**

2815 DIRECTORS ROW  
STE 100 OFFICE 538  
ORLANDO, FL 32809 US

**FEI Number:** 35-2663635

**Certificate of Status Desired:** No

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

COMPANY COMBO, LLC  
7345 W SAND LAKE RD  
STE 210  
ORLANDO, FL 32819 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            AMBR  
Name            RICARDO DOS ANJOS, MICHAEL  
Address        RUA CEL. AUGUSTO CESAR, 836, AP.  
                  92  
City-State-Zip: LEME SP 13610-190

Title            AMBR  
Name            ANDRADE, SERGIO HENRIQU  
Address        RUA JOAO ROBERTO SACHI, 169  
City-State-Zip: LEME SP 13613-411

Title            AMBR  
Name            CARVALHO DE BARROS PEREIRA,  
                  TIAGO  
Address        2652 MAYAGUANA STREET  
City-State-Zip: KISSIMMEE FL 34747

*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:** RICARDO DOS ANJOS , MICHAEL

AMBR

08/13/2021

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

\_\_\_\_\_  
Date