

2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L23000232986

Entity Name: POWER 5 THRIVE LLC

Current Principal Place of Business:

8958 W STATE RD 84
SUITE 1241
FORT LAUDERDALE, FL 33324

Current Mailing Address:

8958 W STATE RD 84
SUITE 1241
FORT LAUDERDALE, FL 33324

FEI Number: 92-4028283

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANTOS, CHRISTIAN
2 S VALENCIA DR
DAVIE, FL 33324 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 JACKSON, ANDRE
Address 1220 HAMPTON BLVD APT 226
City-State-Zip: NORTH LAUDERDALE FL 33068

Title MGR
Name HANSON, MATTHEW
Address 64 MATADOR LN
City-State-Zip: DAVIE FL 33324

Title MGR
Name HANSON, DANIEL
Address 64 MATADOR LN
City-State-Zip: DAVIE FL 33324

Title MGR
Name SANTOS, CHRISTIAN
Address 2 S VALENCIA DR
City-State-Zip: DAVIE FL 33324

Title MGR
Name EVEILLARD, SPENCER
Address 101 EDMUND RD
City-State-Zip: WEST PARK FL 33023

Title MGR
Name SANTOS, DANIEL ANTHONY
Address 2 SOUTH VALENCIA DRIVE
City-State-Zip: DAVIE FL 33324

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: DANIEL SANTOS

MGR

08/02/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date