

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000057190

**Entity Name:** P.S.THAI LLC

**Current Principal Place of Business:**

909 ESSEN AVE NW  
PALM BAY, FL 32907

**Current Mailing Address:**

909 ESSEN AVE NW  
PALM BAY, FL 32907 US

**FEI Number:** 99-1036907

**Certificate of Status Desired:** No

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

PAXTON, EMILY  
909 ESSEN AVE NW  
PALM BAY, FL 32907 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	Title	MGR
Name	PAXTON, EMILY	Name	STEPHENS, BRYAN M
Address	909 ESSEN AVE NW	Address	909 ESSEN AVE NW
City-State-Zip:	PALM BAY FL 32907	City-State-Zip:	PALM BAY FL 32907

*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:** EMILY PAXTON

**MANAGER**

**03/09/2025**

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

\_\_\_\_\_  
Date