

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M18000010278

**Entity Name:** THUNDERROAD FINANCIAL, LLC

**Current Principal Place of Business:**

2248 MERIDIAN BOULEVARD  
SUITE H  
MINDEN, NV 89423

**Current Mailing Address:**

2248 MERIDIAN BOULEVARD  
SUITE H  
MINDEN, NV 89423 US

**FEI Number:** 46-4598399

**Certificate of Status Desired:** No

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

REGISTERED AGENT SOLUTIONS, INC.  
2894 REMINGTON GREEN LANE  
SUITE A  
TALLAHASSEE, FL 32308 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           MANAGER, MEMBER  
Name           DELVERNE, JAMES  
Address        2248 MERIDIAN BOULEVARD  
                  SUITE H  
City-State-Zip: MINDEN NV 89423

Title           MANAGER, MEMBER  
Name           SALON, ADAM  
Address        2248 MERIDIAN BOULEVARD  
                  SUITE H  
City-State-Zip: MINDEN NV 89423

Title           MANAGER, MEMBER  
Name           SCHEICH, RICHARD  
Address        2248 MERIDIAN BOULEVARD  
                  SUITE H  
City-State-Zip: MINDEN NV 89423

*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:** JAMES DELVERNE

**MANAGER**

**01/22/2024**

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

\_\_\_\_\_  
Date