

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000229625

**Entity Name:** POWERHOUSE FINANCIAL INDEPENDENCE NETWORK, LLC

**Current Principal Place of Business:**

521 BALLYSHANNON DR  
DAVENPORT, FL 33897

**Current Mailing Address:**

521 BALLYSHANNON DR  
DAVENPORT, FL 33897 US

**FEI Number: 83-2037372**

**Certificate of Status Desired: No**

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

TORRES, ARMANDO  
521 BALLYSHANNON DR  
DAVENPORT, FL 33897 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	CHAIRMAN, MANAGER	Title	COMPTROLLER, MANAGER
Name	TORRES, ARMANDO	Name	TORRES, VALERIA SILVA
Address	521 BALLYSHANNON DR	Address	521 BALLYSHANNON DR
City-State-Zip:	DAVENPORT FL 33897	City-State-Zip:	DAVENPORT FL 33897

*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: ARMANDO O TORRES**

**CHAIRMAN**

**04/20/2022**

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

\_\_\_\_\_  
Date