

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000098736

Entity Name: CU'TURE XCLUSIVE HOLDINGS, LLC**Current Principal Place of Business:**3585 NE 207 ST.
C9 #741
AVENTURA, FL 33180**Current Mailing Address:**3585 NE 207 ST. C9
#741
AVENTURA, FL 33180 US**FEI Number:** 04-3845423**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HAYNES, SHANTELL
3585 NE 207 ST. C9
#741
AVENTURA, FL 33180 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:** SHANTELL HAYNES

04/15/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title OTHER, SUBSIDIARY
Name BOUJEE DE CU'TURE DESIGNS
Address 3585 NE 207 ST.
C9 #741
City-State-Zip: AVENTURA FL 33180

Title AUTHORIZED MEMBER
Name CU'TURE MEGATAINMENT
Address 3585 NE 207 ST. C9
#741
City-State-Zip: AVENTURA FL 33180

Title OTHER, SUBSIDIARY
Name NOM DE GUERRE HOLDINGS, LLC
Address 3585 NE 207 ST. C9
#741
City-State-Zip: AVENTURA FL 33180

Title OTHER, SUBSIDIARY
Name BAR TIPSHË: SPIRIT SNOBS
Address 3585 NE 207 ST.
C9 #741
City-State-Zip: AVENTURA FL 33180

Title OTHER, SUBSIDIARY
Name CU'TURE XCLUSIVE EVENTS
+XCURSIONS+CONCIERGE
SERVICES
Address 3585 NE 207 ST.
C9 #741
City-State-Zip: AVENTURA FL 33180

Title OTHER, SUBSIDIARY
Name 'THIRË DE CHANEL
Address 3585 NE 207 ST.
C9 #741
City-State-Zip: AVENTURA FL 33180

Title OTHER, SUBSIDIARY
Name GLAÇAGE VEGAN DESSERTISserie
Address 3585 NE 207 ST.
C9 #741
City-State-Zip: AVENTURA FL 33180

Title MANAGER, CFO
Name CRUZ LEON, SHANTELL
Address 3585 NE 207 ST.
C9 #741
City-State-Zip: AVENTURA FL 33180

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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: SHANTELL HAYNES

EXE. DIRECTOR

04/15/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title OTHER, SUBSIDIARY
Name DENISE ROSÉ: SPIRIT CURATOR
Address 3585 NE 207 ST.
C9 #741
City-State-Zip: AVENTURA FL 33180

Title OTHER, SUBSIDIARY
Name SLY STONE
Address 3585 NE 207 STREET
C9 #741
City-State-Zip: AVENTURA FL 33180

Title OTHER, SUBSIDIARY, FESTIVAL
Name {B3}SNOBS: BIKERS+BURGERS+BEERS
Address 3585 NE 207 STREET
C9 #741
City-State-Zip: AVENTURA FL 33180

Title OTHER, SUBSIDIARY
Name 'DÄK'LYFE POWERED BY: CU'TURE
MEGATAINMENT
Address 3585 NE 207 STREET
C9 #741
City-State-Zip: AVENTURA FL 33180

Title OTHER, SUBSIDIARY
Name BASEL'WOOD
Address 3585 NE 207 STREET
C9 #741
City-State-Zip: AVENTURA FL 33180

Title OTHER, SUBSIDIARY, FESTIVAL
Name LYRICALLY 'LAÛD
Address 3585 NE 207 STREET
C9 #741
City-State-Zip: AVENTURA FL 33180