

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000078976

**Entity Name:** LUX BOUTIQUE, LLC

**Current Principal Place of Business:**

4262 GULFSHORE BLVD NORTH  
NAPLES, FL 34103

**Current Mailing Address:**

4262 GULFSHORE BLVD NORTH  
NAPLES, FL 34103 US

**FEI Number:** 27-0754357

**Certificate of Status Desired:** No

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

JOHN C. GOEDE, P.A.  
9915 TAMiami TRAIL  
SUITE 1  
NAPLES, FL 34108 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 MGRM  
Name WILSON, ANGELA  
Address 1835 SEVILLE BLVD, #722  
City-State-Zip: NAPLES FL 34109

*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:** ANGELA WILSON

**OWNER**

**01/12/2015**

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

\_\_\_\_\_  
Date