

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000057012

**Entity Name:** MICHELLIAH-MS. AUTHENTIC ENTERPRISES, LLC

**Current Principal Place of Business:**

10211 PINES BOULEVARD  
#185  
PEMBROKE PINES, FL 33026

**Current Mailing Address:**

10211 PINES BOULEVARD  
#185  
PEMBROKE PINES, FL 33026 US

**FEI Number:** 80-0847972

**Certificate of Status Desired:** No

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

DAVIS-MCCRANEY, MICHELLIAH  
10211 PINES BOULEVARD  
#185  
PEMBROKE PINES, FL 33026 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 DAVIS MCCRANEY, MICHELLIAH  
Address 10211 PINES BOULEVARD  
City-State-Zip: PEMBROKE PINES FL 33026

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MICHELLIAH DAVIS MCCRANEY

**MGRM**

**04/19/2013**

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

\_\_\_\_\_  
Date