

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000096361

Entity Name: IT'S CHARISMA LLC**Current Principal Place of Business:**777 S FEDERAL HWY
G114
POMPANO BEACH, FL 33062**Current Mailing Address:**319 S BALTHAZAR DRIVE
SANTA CLAUS, IN 47579 US**FEI Number:** 82-1368518**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JANAY, LAURA
777 S FEDERAL HWY
G114
POMPANO BEACH, FL 33062 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 | MGR |
| Name | JANAY, LAURA |
| Address | 777 S FEDERAL HWY G114 |
| City-State-Zip: | POMPANO BEACH FL 33062 |

| | |
|-----------------|-------------------------|
| Title | AMBR |
| Name | STOERMER, JORDAN THOMAS |
| Address | 1652 HILL BRIDGE RD |
| City-State-Zip: | OWENSBORO KY 42303 |

| | |
|-----------------|------------------------|
| Title | AMBR |
| Name | STOERMER, JASON SCOTT |
| Address | 836 SWEET BAY AVE |
| City-State-Zip: | BOWLING GREEN KY 42104 |

| | |
|-----------------|---------------------------|
| Title | AUTHORIZED REPRESENTATIVE |
| Name | STOERMER, SABRINA JANE |
| Address | 3764 PINE LAKE CT |
| City-State-Zip: | OWENSBORO KY 42303 |

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: LAURA JANAY

MGR

04/28/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date