

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000235403

**Entity Name:** A' UNIQUE BOUTIQUE "LLC"

**Current Principal Place of Business:**

7452 RIMROCK CT  
JACKSONVILLE, FL 32222

**Current Mailing Address:**

P O BOX 441122  
JACKSONVILLE, FL 32244

**FEI Number:** 82-3431850

**Certificate of Status Desired:** No

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

LEE-PHILPOT, SHARMAN  
7452 RIMROCK CT  
JACKSONVILLE, FL 32222 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 LEE-PHILPOT, SHARMAN  
Address 7452 RIMROCK CT  
City-State-Zip: JACKSONVILLE FL 32222

Title AP  
Name PHILPOT, LARRY L  
Address 7452 RIMROCK CT  
City-State-Zip: JACKSONVILLE FL 32222

*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:** SHARMAN LEE-PHILPOT

MGR

04/08/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date