## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000110513

Entity Name: NO KISSES PLEASE LLC

**Current Principal Place of Business:** 

921 SW CONSOLATA AVE PORT ST. LUCIE . FL 34953

**Current Mailing Address:** 

921 SW CONSOLATA AVE PORT ST. LUCIE, FL 34953 US

FEI Number: 86-2725241 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEE, LENESHA R 921 SW CONSOLATA AVE PORT ST. LUCIE , FL 34953 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

FILED Apr 07, 2024

**Secretary of State** 

9174117188CC

Authorized Person(s) Detail:

Title MGR Title MGR

NameLEE, LENESHA RNamePETERKIN, SEAN P JR.Address921 SW CONSOLATA AVEAddress921 SW CONSOLATA AVECity-State-Zip:PORT ST. LUCIE FL 34953City-State-Zip:PORT ST. LUCIE FL 34953

Title AMBR Title AMBR

Name PETERKIN, ZOE N Name PETERKIN, ZAC N

Address 921 SW CONSOLATA AVE Address 921 SW CONSOLATA AVE

City-State-Zip: PORT ST. LUCIE FL 34953 City-State-Zip: PORT ST. LUCIE FL 34953

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: LENESHA LEE MANAGER 04/07/2024