

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000250996

**Entity Name:** AUTHENTIC FAITH LLC

**Current Principal Place of Business:**

8611 FAB STREET  
PENSACOLA, FL 32514

**Current Mailing Address:**

8611 FAB STREET  
PENSACOLA, FL 32514 US

**FEI Number:** 85-3335710

**Certificate of Status Desired:** No

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

DAVIS, NAKERIA  
506 CREST LANE DR SE  
SMYRNA, FL 30080 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 DAVIS, NAKERIA  
Address 8611 FAB STREET  
City-State-Zip: PENSACOLA FL 32514

*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:** NAKERIA DAVIS

MANAGER

05/01/2021

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

\_\_\_\_\_  
Date