

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000042123

**Entity Name:** SHANELLE LUXE BOUTIQUE, LLC

**Current Principal Place of Business:**

9200 NW 39TH AVE  
STE 130-3470  
GAINESVILLE, FL 32606

**Current Mailing Address:**

9200 NW 39TH AVE  
STE 130-3470  
GAINESVILLE, FL 32606 US

**FEI Number:** 88-0550703

**Certificate of Status Desired:** No

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

MEANS, CHIVON S  
9200 NW 39TH AVE  
STE 130-3470  
GAINESVILLE, FL 32606 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	Title	AMBR
Name	MEANS, CHIVON S	Name	MEANS, QUINTERRIAN D
Address	9200 NW 39TH AVE STE 130-3470	Address	9200 NW 39TH AVE STE 130-3470
City-State-Zip:	GAINESVILLE FL 32606	City-State-Zip:	GAINESVILLE FL 32606

*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:** CHIVON MEANS

**MANAGER**

**04/10/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date