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.

CEO

SIGNATURE: STACEYANN DYER

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail :

Authorized Ferson(s) Detail .			
Title	CEO	Title	DIRECTOR
Name	DYER, STACEYANN P	Name	REID, ZYONNA
Address	8872 N ISLES CIR	Address	151 N NOB HILL ROAD
City-State-Zip:	TAMARAC FL 33321		140
		City-State-Zip:	PLANTATION FL 33324
Title	TREASURER	Title Name	VP
Name	MORRIS. ZANE		
			REID, ZYONNE
Address	151 N NOB HILL ROAD	Address	151 N NOB HILL ROAD
	140	/ 441000	
City-State-Zip:	140 PLANTATION FL 33324	City-State-Zip:	140 PLANTATION FL 33324

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.

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

DYER, STACEYANN P 8872 N ISLES CIR TAMARAC, FL 33321 US

SIGNATURE:

DOCUMENT# L22000313925

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: SELAHS CLOSET LLC

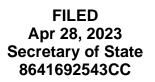
Current Principal Place of Business:

151 N NOB HILL ROAD 140 PLANTATION, FL 33324

Current Mailing Address:

151 N NOB HILL ROAD 140 PLANTATION, FL 33324

FEI Number: 88-3004618



Certificate of Status Desired: Yes

Date

04/28/2023 Date