

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000411160

**Entity Name:** OUI SLAY GOURMET LLC

**Current Principal Place of Business:**

UNIT 48111  
TAMPA, FL 33647

**Current Mailing Address:**

30142 FIVE FARMS AVE  
WESLEY CHAPEL, FL 33543

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

GRIFFITH, CHEVONNE M  
30142 FIVE FARMS AVE  
WESLEY CHAPEL, FL 33543 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            OWNER  
Name            GRIFFITH, CHEVONNE  
Address        UNIT 48111  
City-State-Zip: TAMPA FL 33647

*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:** CHEVONNE GRIFFITH

OWNER

04/19/2023

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

\_\_\_\_\_ Date