

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000040404

Entity Name: 4 LOVE OVERCOMES VIRTUALLY EVERYTHING (4 L.O.V.E.),
LLC**FILED**
Jan 29, 2024
Secretary of State
2178801757CC**Current Principal Place of Business:**3125 LOUISE STREET
TALLAHASSEE, FL 32304**Current Mailing Address:**3125 LOUISE STREET
TALLAHASSEE, FL 32304 UN**FEI Number:** 92-2036946**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**POITIER, DRUCILLA N
3125 LOUISE STREET
TALLAHASSEE, FL 32304 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	CFO	Title	PRES
Name	NATHANIEL, ANGELA L	Name	NIX, JETHROE
Address	3125 LOUISE STREET	Address	925 E. MAGNOLIA DRIVE , APT R6
City-State-Zip:	TALLAHASSEE FL 32304	City-State-Zip:	TALLAHASSEE FL 32301
Title	VP	Title	SECY
Name	POITIER, CHRISTOPHER	Name	POITIER, DRUCILLA N
Address	1828 CLINTS TRAIL	Address	3125 LOUISE STREET
City-State-Zip:	TALLAHASSEE FL 32303	City-State-Zip:	TALLAHASSEE FL 32304
Title	DOM		
Name	CLAY, DEBORAH		
Address	925 MAGNOLIA DRIVE APT F4		
City-State-Zip:	TALLAHASSEE FL 32301		

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: DRUCILLA N. POITIER**REGISTERED**
AGENT/SECY**01/29/2024**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date