

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000214961

**Entity Name:** CRISTY ELIZABETH LLC

**Current Principal Place of Business:**

440 ALMOND STREET  
CLERMONT, FL 34711

**Current Mailing Address:**

440 ALMOND STREET  
CLERMONT, FL 34711

**FEI Number:** 92-3757211

**Certificate of Status Desired:** No

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

PUEBLA, CRISTY E  
440 ALMOND STREET  
CLERMONT, FL 34711 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 CRISTY E. PUEBLA  
Address 440 ALMOND STREET  
City-State-Zip: CLERMONT FL 34711

*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:** CRISTY E. PUEBLA

**AUTHORIZED MANAGER**

**02/20/2024**

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

\_\_\_\_\_  
Date