

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000262121

**Entity Name:** SLAY ESTATES LLC

**Current Principal Place of Business:**

1756 NORTH BAYSHORE DRIVE  
APT 23L  
MIAMI, FL 33132

**FILED**  
**Mar 07, 2024**  
**Secretary of State**  
**1084913239CC**

**Current Mailing Address:**

1756 NORTH BAYSHORE DRIVE  
APT 23L  
MIAMI, FL 33132 US

**FEI Number:** 93-1647317

**Certificate of Status Desired:** No

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

CARON-GERSTINE, KELLY  
1756 NORTH BAYSHORE DRIVE  
APT 23L  
MIAMI, FL 33132 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            CEO  
Name            CARON-GERSTINE, KELLY  
Address        1756 NORTH BAYSHORE DRIVE APT  
                  23L  
City-State-Zip: MIAMI FL 33132

*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:** CARON-GERSTINE , KELLY

CEO

03/07/2024

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

\_\_\_\_\_  
Date