

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000539076

**Entity Name:** BLESSED EARLY LEARNING ACADEMY LLC

**Current Principal Place of Business:**

1519 W 6TH STREET  
JACKSONVILLE, FL 32209

**Current Mailing Address:**

1519 W 6TH STREET  
JACKSONVILLE, FL 32209

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

SADBERRY, ARKEKO M  
1519 W 6TH STREET  
JACKSONVILLE, FL 32209 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 P  
Name SHEPPARD, ARKEKO M  
Address 1519 W 6TH STREET  
City-State-Zip: JACKSONVILLE FL 32209

Title VP  
Name SADBERRY, RAYMOND H  
Address 1519 W 6TH  
City-State-Zip: JACKSONVILLE FL 32209

*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:** ARKEKO SHEPPARD SADBERRY

**PRESIDENT**

**04/30/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date