2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000009094

Entity Name: BEBLESSED LLC

Current Principal Place of Business:

501 NW CORNELL AVE. PORT SAINT LUCIE, FL 34983

Current Mailing Address:

501 NW CORNELL AVE. PORT SAINT LUCIE, FL 34983 US

FEI Number: 45-4328278

Name and Address of Current Registered Agent:

KEHRES, THOMAS 501 NW CORNELL AVE. PORT SAINT LUCIE, FL 34983 US FILED Jan 09, 2023 Secretary of State 0574716169CC

Date

Certificate of Status Desired: No

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

Authorized Person(s) Detail :

MGRM	Title	MGRM
KEHRES, THOMAS	Name	KEHRES, REBECCA
501 NW CORNELL AVE.	Address	501 NW CORNELL AVE.
PORT SAINT LUCIE FL 34983	City-State-Zip:	PORT SAINT LUCIE FL 34983
DIRECTOR	Title	DIRECTOR
KEHRES, JOSHUA THOMAS	Name	KEHRES, AARON FREDRICK
501 NW CORNELL AVE.	Address	501 NW CORNELL AVE.
	City-State-Zin	PORT SAINT LUCIE FL 34983
	KEHRES, THOMAS 501 NW CORNELL AVE. PORT SAINT LUCIE FL 34983 DIRECTOR KEHRES, JOSHUA THOMAS 501 NW CORNELL AVE.	KEHRES, THOMASName501 NW CORNELL AVE.AddressPORT SAINT LUCIE FL 34983City-State-Zip:DIRECTORTitleKEHRES, JOSHUA THOMASName

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: THOMAS KEHRES

MGRM

01/09/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date