

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000171480

**Entity Name:** LISA LEFEVRE PHOTOGRAPHY, LLC.

**Current Principal Place of Business:**

15760 BON EDRIOT DRIVE  
MILTON, GA 30004

**Current Mailing Address:**

15760 BON EDRIOT DRIVE  
MILTON, GA 30004 US

**FEI Number:** 47-2238757

**Certificate of Status Desired:** No

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

LEFEVRE, LISA B  
15760 BON EDRIOT DRIVE  
MILTON, FL 30004 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            LEFEVRE, LISA B  
Address        15760 BON EDRIOT DRIVE  
City-State-Zip: MILTON GA 30004

*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:** LISA LEFEVRE

**OWNER/ CEO**

**04/05/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date