

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000157123

Entity Name: ELEVATED XPERIENCE LLC

Current Principal Place of Business:

5004 E FOWLER AVE
C310
TAMPA, FL 33637

Current Mailing Address:

5004 E FOWLER AVE
C310
TAMPA, FL 33637

FEI Number: 82-2239036

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPENCER, CEDRICKA J
8913 BRIDGEFORD OAKS DR
TAMPA, FL 33637 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 MRG
Name SPENCER, CEDRICKA J
Address 8913 BRIGDEFORD OAKS DR
City-State-Zip: TAMPA FL 33637

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: CEDRICKA SPENCER

CEO

04/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date