## **2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000173778

Entity Name: POOL DIVAS, LLC

**Current Principal Place of Business:** 

417 NW 27TH ST

WILTON MANORS. FL 33311

**Current Mailing Address:** 

417 NW 27TH ST

WILTON MANORS. FL 33311 US

FEI Number: 82-2921899 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOSSETT, ANGIE 417 NW 27TH ST

WILTON MANORS, FL 33311 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

**FILED** Apr 05, 2023

**Secretary of State** 

1090709925CC

## Authorized Person(s) Detail:

**PRESIDENT** Title

Name GOSSETT, ANGELA Address 417 NW 27TH ST

City-State-Zip: WILTON MANORS FL 33311

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: ANGELA GOSSETT **PRESIDENT** 

Electronic Signature of Signing Authorized Person(s) Detail

04/05/2023 Date