## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000207174

Entity Name: ALICIA'S LLC

**Current Principal Place of Business:** 

5195 47TH AVE N

ST PETERSBURG, FL 33709

**Current Mailing Address:** 

5195 47TH AVENUE NORTH ST. PETERSBURG, FL 33709 US

FEI Number: 84-3387574 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ANDERSON, ALICIA 5195 47TH AVENUE NORTH ST. PETERSBURG, FL 33709 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: ALICIA ANDERSON 02/05/2024

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title

Name ANDERSON, ALICIA H 5195 47TH AVE N Address

City-State-Zip: ST PETERSBURG FL 33709

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: ALICIA ANDERSON **MEMBER** 

Electronic Signature of Signing Authorized Person(s) Detail

02/05/2024 Date

**FILED** Feb 05, 2024

**Secretary of State** 

0739814430CC

Date