

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000087799

**Entity Name:** POSH BEAUTY & BOUTIQUE LLC

**Current Principal Place of Business:**

2010 WESTMONT ST  
SUITE 1  
JACKSONVILLE, FL 32209

**Current Mailing Address:**

1750 MCQUADE STREET  
JACKSONVILLE, FL 32209 US

**FEI Number:** 46-1369510

**Certificate of Status Desired:** No

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

THOMAS, NAKESHA N  
2010 WESTMONT ST  
JACKSONVILLE, FL 32207 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 AUTHORIZED REPRESENTATIVE

Name THOMAS, NAKESHA N

Address 1750 MCQUADE STREET

City-State-Zip: JACKSONVILLE FL 32209

Title MNGR

Name GIBSON, HELENA L

Address 1750 MCQUADE STREET

City-State-Zip: JACKSONVILLE FL 32209

*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:** NAKESHA THOMAS

**OWNER**

**04/01/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date