2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT	
DOCUMENT# L20000393167	

Entity Name: MITCHELLS EXPERIENCE LLC

## **Current Principal Place of Business:**

22845 PORT ROYAL LN CUDJOE KEY, FL 33042

## **Current Mailing Address:**

22845 PORT ROYAL LN CUDJOE KEY. FL 33042 US

## FEI Number: 86-1483092

## Name and Address of Current Registered Agent:

MITCHELL, STEVE 22845 PORT ROYAL LN CUDJOE KEY, FL 33042 US Certificate of Status Desired: No

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	STEVE MITCHELL			02/09/2024	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	MGR	Title	MGR		
Name	MITCHELL, ZACH	Name	MITCHELL, BREY		
Address	22845 PORT ROYAL LN	Address	22845 PORT ROYAL LN		
City-State-Zip:	CUDJOE KEY FL 33042	City-State-Zip:	CUDJOE KEY FL 33042		
Title	MGR	Title	MGR		
Name	MITCHELL, STEVE	Name	MITCHELL, LUCRECTIA		
Address	22845 PORT ROYAL LN	Address	22845 PORT ROYAL LN		
City-State-Zip:	CUDJOE KEY FL 33042	City-State-Zip:	CUDJOE KEY FL 33042		
Title	MGR				
Name	AUSTIN, BROOKE				
Address	22845 PORT ROYAL LN				
City-State-Zip:	CUDJOE KEY FL 33042				

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: STEVE MITCHELL

MGR

Electronic Signature of Signing Authorized Person(s) Detail