

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000062020

**Entity Name:** ELEVEN ELEVEN BOUTIQUE LLC

**Current Principal Place of Business:**

6847 N 9TH AVE  
STE A #120  
PENSACOLA, FL 32504

**Current Mailing Address:**

6847 N 9TH AVE  
STE A #120  
PENSACOLA, FL 32504 US

**FEI Number:** 86-2117583

**Certificate of Status Desired:** Yes

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

HALE, KODI K  
1717 W.CERVANTES STREET  
3009  
PENSACOLA, FL 32501 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 MANGER  
Name HALE, KODI  
Address 1717 WEST CERVANTES STREET  
3009  
City-State-Zip: PENSACOLA FL 32501

Title AUTHORIZED REPRESENTATIVE  
Name ELLIS, AMIR  
Address 1717 WEST CERVANTES STREET  
3009  
City-State-Zip: PENSACOLA FL 32501

*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:** KODI HALE

**MANGER**

**04/30/2022**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date