

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000157870

**Entity Name:** SHEKINAH'S ARTISTRY LLC

**Current Principal Place of Business:**

5120 E CRISTEN CT  
INVERNESS, FL 34452

**Current Mailing Address:**

5120 E CRISTEN CT  
INVERNESS, FL 34452 US

**FEI Number: 86-3343043**

**Certificate of Status Desired:** No

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

WASHINGTON, SHEKINAH  
5120 E CRISTEN CT  
INVERNESS, FL 34452 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 MGRM  
Name WASHINGTON, SHEKINAH  
Address 5120 E CRISTEN CT  
City-State-Zip: INVERNESS FL 34452

*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:** SHEKINAH WASHINGTON

CEO

03/24/2023

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

\_\_\_\_\_ Date