

**2022 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L21000323373

**Entity Name:** SHELLY LAVONNE, LLC

**Current Principal Place of Business:**

278 SEMORAN COMMERCE PL.  
APOPKA, FL 32703

**Current Mailing Address:**

278 SEMORAN COMMERCE PL.  
APOPKA, FL 32703 US

**FEI Number:** 84-2051847

**Certificate of Status Desired:** No

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

LAVONNE-BEST, SHELLY  
278 SEMORAN COMMERCE PL.  
APOPKA, FL 32703 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:** SHELLY LAVONNE-BEST

11/21/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name LAVONNE-BEST, SHELLY  
Address 278 SEMORAN COMMERCE PL.  
City-State-Zip: APOPKA FL 32703

*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:** SHELLY LAVONNE-BEST

MGR

11/21/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date