

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000368524

Entity Name: LOVLE'E LLC

Current Principal Place of Business:

4437 ATWATER DR
TAMPA, FL 33610

Current Mailing Address:

4437 ATWATER DR
TAMPA, FL 33610

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHAPMAN, LAKESHIA
4437 ATWATER DR
TAMPA, FL 33610 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 AMBR
Name CHAPMAN, LAKESHIA
Address 4437 ATWATER DR
City-State-Zip: TAMPA FL 33610

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: LAKESHIA CHAPMAN

04/25/2023

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date