1463 NW 126TH CORAL SPRING				
Current Mai	ling Address:			
1463 NW 12 CORAL SPR	6TH DR. RINGS, FL 33071			
FEI Number: 87-2344218 Certificate of Sta			Certificate of Status Des	ired: No
Name and A	ddress of Current Registered Agent:			
MANUEL, MELI 1463 NW 126TH CORAL SPRING				
1463 NW 126TH CORAL SPRING	H DRIVE	tered office or regis	tered agent, or both, in the State of Flo	orida.
1463 NW 126TH CORAL SPRING The above named	HDRIVE GS, FL 33071 US	tered office or regis	tered agent, or both, in the State of Flo	orida. 04/30/2024
1463 NW 126TH CORAL SPRING The above named	H DRIVE GS, FL 33071 US I entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Flo	
1463 NW 126TH CORAL SPRING The above named SIGNATURE	DRIVE         GS, FL 33071 US         d entity submits this statement for the purpose of changing its regis         E:       MELISSA MANUEL	tered office or regis	tered agent, or both, in the State of Flo	04/30/2024
1463 NW 126TH CORAL SPRING The above named SIGNATURE	DRIVE     GS, FL 33071 US     dentity submits this statement for the purpose of changing its regis     MELISSA MANUEL     Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Flo	04/30/2024
1463 NW 126TH CORAL SPRING The above named SIGNATURE	DRIVE     GS, FL 33071 US     d entity submits this statement for the purpose of changing its regis <u>MELISSA MANUEL     Electronic Signature of Registered Agent     Person(s) Detail : </u>			04/30/2024
1463 NW 126TH CORAL SPRING The above named SIGNATURE Authorized	DRIVE     GS, FL 33071 US     d entity submits this statement for the purpose of changing its regis <u>MELISSA MANUEL     Electronic Signature of Registered Agent     Person(s) Detail :     PRESIDENT, AUTHORIZED MEMBER     </u>	Title	MGR, VP	04/30/2024

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: MELISSA D. MANUEL

OWNER

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

## Entity Name: MANUELS CREATIONS AND EMBROIDERY LLC

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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

Date