

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000456918

**Entity Name:** 2LS ENTERPRISES, LLC

**Current Principal Place of Business:**

899 NW 214 STREET  
#201  
MIAMI, FL 33169

**Current Mailing Address:**

899 NW 214 STREET  
#201  
MIAMI, FL 33169

**FEI Number:** 87-3179155

**Certificate of Status Desired:** No

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

WILLIAMS, MONIQUE  
899 NW 214 STREET  
#201  
MIAMI, FL 33169 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:** MONIQUE WILLIAMS

01/24/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name WILLIAMS, SHARONDR A  
Address 899 NW 214 STREET #201  
City-State-Zip: MIAMI FL 33169

Title AMBR  
Name CAMON, LEWIS  
Address 899 NW 214 STREET #201  
City-State-Zip: MIAMI FL 33169

*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:** SHARONDR A MONIQUE WILLIAMS

REGISTERED AGENT

01/24/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date