

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000479642

Entity Name: NICOLE SHEPPARD, LLC

Current Principal Place of Business:

619 CARIBBEAN WAY
NICEVILLE, FL 32578

Current Mailing Address:

PO BOX 5424
NICEVILLE, FL 32578

FEI Number: 36-2661987

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHEPPARD, NICOLE
619 CARIBBEAN WAY
NICEVILLE, FL 32578 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 MGR
Name SHEPPARD, NICOLE
Address 619 CARIBBEAN WAY
City-State-Zip: NICEVILLE FL 32578

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: NICOLE SHEPPARD

03/22/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date