

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000012209

**Entity Name:** IVY AND ALE LLC

**Current Principal Place of Business:**

222 HOSPITAL DRIVE  
FORT WALTON BEACH, FL 32548

**Current Mailing Address:**

222 HOSPITAL DRIVE  
FORT WALTON BEACH, FL 32548 US

**FEI Number:** 87-4384922

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS, INC.  
476 RIVERSIDE AVE.  
JACKSONVILLE, FL 32202 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            HILL, JAMIE C  
Address        222 HOSPITAL DRIVE  
City-State-Zip: FORT WALTON BEACH FL 32548

*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:** JAMIE HILL

**OWNER**

**05/24/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date