

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000161072

**Entity Name:** LOCAL HUB LLC

**Current Principal Place of Business:**

11229 ARDENCROFT CT  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

11229 ARDENCROFT CT  
JACKSONVILLE, FL 32246 UN

**FEI Number:** 88-1857101

**Certificate of Status Desired:** No

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

EDELBI, QOUSAI  
11229 ARDENCROFT CT  
JACKSONVILLE, FL 32246 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 EDELBI, QOUSAI  
Address 11229 ARDENCROFT CT  
City-State-Zip: JACKSONVILLE FL 32246

Title MGR  
Name ABDOU, HATEM A  
Address 8081 SUMMER BAY CT  
City-State-Zip: JACKSONVILLE FL 32256

Title MGR  
Name HARMOUCHE, HAMZA  
Address 11229 ARDENCROFT CT  
City-State-Zip: JACKSONVILLE FL 32246

*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:** HAMZA HARMOUCHE

MANAGER

02/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date