

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000464169

**Entity Name:** BELLE SLEEP LLC

**Current Principal Place of Business:**

12460 BEACH BLVD 3-260  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

12460 BEACH BLVD 3-260  
JACKSONVILLE, FL 32246 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

GARRETT, LARONKA  
12460 BEACH BLVD 3-260  
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            CEO  
Name            GARRETT, LARONKA  
Address        12460 BEACH BLVD 3-260  
City-State-Zip: JACKSONVILLE FL 32246

Title            P  
Name            ST JUSTE, HERODE  
Address        12460 BEACH BLVD 3-260  
City-State-Zip: JACKSONVILLE FL 32246

Title            MGR  
Name            GARRETT, DIONTE  
Address        12460 BEACH BLVD 3-260  
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:** LARONKA GARRETT

CEO

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date