

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000114022

**Entity Name:** BAD MOMS BOUTIQUE LLC

**Current Principal Place of Business:**

1415 WEST MAIN ST  
WAUCHULA, FL 33873

**Current Mailing Address:**

1415 WEST MAIN ST  
WAUCHULA, FL 33873 US

**FEI Number:** 92-2853490

**Certificate of Status Desired:** No

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

GANDY, KAVION J  
1415 WEST MAIN ST  
WAUCHULA, FL 33873 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            OWNER  
Name            SMALLWOOD, ALYSSA  
Address        1415 WEST MAIN ST  
City-State-Zip: WAUCHULA FL 33873

*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:** ALYSSA SMALLWOOD

OWNER

04/30/2024

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date