

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000363076

Entity Name: ALICIA'S APOTHECARY, LLC

Current Principal Place of Business:

441 W. BRANCH ST
LANTANA, FL 33462

Current Mailing Address:

441 W. BRANCH ST
LANTANA, FL 33462 US

FEI Number: 93-2548772

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CROCCO, ALICIA C
441 W. BRANCH ST
LANTANA, FL 33462 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 CROCCO, ALICIA C
Address 441 W. BRANCH ST
City-State-Zip: LANTANA FL 33462

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: ALICIA CROCCO

MANAGER

01/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date