

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000000475

**Entity Name:** WESTERN HARVEST CANDLE CO, LLC

**Current Principal Place of Business:**

4613 SE DRYFUS  
STUART, FL 34997

**Current Mailing Address:**

4613 SE DRYFUS  
STUART, FL 34997 US

**FEI Number:** 99-0664771

**Certificate of Status Desired:** No

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

INC AUTHORITY RA  
390 NORTH ORANGE AVE., STE 2300-N  
ORLANDO, FL 32801 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	Title	MGR
Name	JOERN, BLAKE	Name	GUNEERSON, LEA
Address	4613 SE DRYFUS	Address	4613 SE DRYFUS
City-State-Zip:	STUART FL 34997	City-State-Zip:	STUART FL 34997

*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:** BLAKE JOERN

**MGR**

**03/13/2024**

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

\_\_\_\_\_  
Date