	lining Addiess:			
P O BOX 79				
NEW ORLE	ANS, LA 70179 US			
FEI Number: 59-3667195			Certificate of Status Desired: No	
Name and	Address of Current Registered Agent:			
GARDNER, MI 78 INLET HAR				
	r, FL 32127 US			
PONCE INLET	Γ, FL 32127 US ed entity submits this statement for the purpose of changing i	its registered office or regi	tered agent, or both, in the State of Flo	orida.
PONCE INLET		its registered office or regi	stered agent, or both, in the State of Flo	orida. 03/30/2023
PONCE INLET	ed entity submits this statement for the purpose of changing i	its registered office or regi	stered agent, or both, in the State of Flo	
PONCE INLET The above name SIGNATUR	ed entity submits this statement for the purpose of changing in E: MICHAEL GARDNER	its registered office or regi	stered agent, or both, in the State of Flo	03/30/2023
PONCE INLET The above name SIGNATUR	ed entity submits this statement for the purpose of changing in E: MICHAEL GARDNER Electronic Signature of Registered Agent	its registered office or regis	stered agent, or both, in the State of Flo	03/30/2023
PONCE INLET The above name SIGNATUR Officer/Dire	ed entity submits this statement for the purpose of changing in E: MICHAEL GARDNER Electronic Signature of Registered Agent ector Detail : PRESIDENT ANDREWS-MEREDITH, ANTOINETTE			03/30/2023
PONCE INLET The above name SIGNATUR Officer/Dire Title	ed entity submits this statement for the purpose of changing in E: MICHAEL GARDNER Electronic Signature of Registered Agent ector Detail : PRESIDENT	Title	SEC	03/30/2023

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTOINETTE ANDREWS-MEREDITH

Electronic Signature of Signing Officer/Director Detail

## 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000073320

Entity Name: ELLIPSIS INC.

## **Current Principal Place of Business:**

City-State-Zip: NEW ORLEANS LA 70179

125 SOUTH MURAT STREET NEW ORLEANS. LA 70119

## **Current Mailing Address:**

FILED Mar 30, 2023 **Secretary of State** 5107182256CC

03/30/2023

Date

PRESIDENT

City-State-Zip: NEW ORLEANS LA 70179