

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000154793

Entity Name: SPA PARTY 2 U LLC

Current Principal Place of Business:

3405 SALTEE CIRCLE
ORMOND BEACH, FL 32174

Current Mailing Address:

P.O. BOX 730394
ORMOND BEACH, FL 32173

FEI Number: 30-0799467

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, KATHRYN
3405 SALTEE CIRCLE
ORMOND BEACH, FL 32174 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
Name SMITH, KATHRYN A
Address 3405 SALTEE CIRCLE
City-State-Zip: ORMOND BEACH FL 32174

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: KATHRYN SMITH

MANAGER

01/16/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date