

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000165078

**Entity Name:** STL SPAS LLC

**Current Principal Place of Business:**

850 NW 42ND AVE  
SUITE 102  
MIAMI, FL 33126

**Current Mailing Address:**

721 TAMIAMI BLVD  
MIAMI, FL 33144 US

**FEI Number:** 84-4464481

**Certificate of Status Desired:** No

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

TOLEDO, LAURA M  
9367 FONTAINEBLEAU BLVD  
G120  
MIAMI, FL 33172 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 TOLEDO, LAURA M  
Address 9367 FONTAINEBLEAU G120  
City-State-Zip: MIAMI FL 33172

*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:** LAURA TOLEDO

02/10/2023

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

\_\_\_\_\_  
Date