

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000066964

**Entity Name:** LACTATION YOUR WAY LLC

**Current Principal Place of Business:**

20341 NE 30TH AVE  
121  
AVENTURA, FL 33180

**Current Mailing Address:**

20341 NE 30TH AVE  
121  
AVENTURA, FL 33180

**FEI Number:** 84-5019892

**Certificate of Status Desired:** No

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

COLEMAN, ANTHONY G JR  
2151 WEST HILLSBORO BLVD  
206  
DEERFIELD BEACH, FL 33442 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 CAMAS, ROSEMARIE  
Address 20341 NE 30TH AVE #121  
City-State-Zip: AVENTURA FL 33180

*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:** CAMAS, ROSEMARIE

**MANAGER**

**04/03/2023**

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

\_\_\_\_\_  
Date