

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000335431

**Entity Name:** SKYRENITY AROMATHERAPY LLC

**Current Principal Place of Business:**

6202 TEBBETTS DR  
ORLANDO, FL 32808

**Current Mailing Address:**

6202 TEBBETTS DR  
ORLANDO, FL 32808

**FEI Number:** 85-3783822

**Certificate of Status Desired:** No

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

WITTER, CHELSEA H  
5556 CENTURY 21 BLVD APT 152  
ORLANDO, FL 32807 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           MANAGER  
Name           WITTER, CHELSEA  
Address        6202 TEBBETTS DR  
City-State-Zip: ORLANDO FL 32808

*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:** CHELSEA WITTER

MANAGER

04/28/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date