

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000118157

**Entity Name:** SHEREESE STYLED YOU LLC

**Current Principal Place of Business:**

3430 BISHOP PARK DR  
APT 223  
WINTER PARK, FL 32792

**Current Mailing Address:**

P.O BOX 811061  
BOCA RATON, FL 33481-1061 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

SHEREESE, SPENCER M  
3430 BISHOP PARK DR  
APT 223  
WINTER PARK, FL 32792 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            SPENCER, SHEREESE M  
Address        3430 BISHOP PARK DR  
City-State-Zip: WINTER PARK FL 32792

Title            MGRM  
Name            SPENCER, SHEREESE M  
Address        3430 BISHOP PARK DR  
City-State-Zip: WINTER PARK FL 32792

*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:** SHEREESE SPENCER

**MGR**

**02/25/2023**

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

\_\_\_\_\_  
Date