

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000407521

**Entity Name:** ALWAYS SHINE SOAP LLC

**Current Principal Place of Business:**

22189 STORYBOOK CABIN WAY  
LAND O LAKES, FL 34637

**Current Mailing Address:**

22189 STORYBOOK CABIN WAY  
LAND O LAKES, FL 34637 US

**FEI Number:** 92-0505304

**Certificate of Status Desired:** No

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

WILLETTE, JENNIFER L  
22189 STORYBOOK CABIN WAY  
LAND O LAKES, FL 34637 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	Title	AP
Name	WILLETTE, JENNIFER L	Name	WILLETTE, CASEY
Address	22189 STORYBOOK CABIN WAY	Address	22189 STORYBOOK CABIN WAY
City-State-Zip:	LAND O LAKES FL 34637	City-State-Zip:	LAND O LAKES FL 34637

*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:** JENNIFER WILLETTE

**MGR**

**01/21/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date