## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000098562

Entity Name: SHAPES FRANCHISING, LLC

**Current Principal Place of Business:** 

4613 N UNIVERSITY DR PMB 532 PMB532

CORAL SPRINS, FL 33067

**Current Mailing Address:** 

4316 N UNIVERSITY DRIVE PMB 532 CORAL SPRINGS, FL 33067 US

FEI Number: 46-2355094 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

O'DWYER, RORY 4613 N UNIVERSITY DR PMB 532 PMB532 CORAL SPRINGS, FL 33067 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: RORY O'DWYER 02/01/2024

Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

Title MGR

Name O'DWYER, RORY

Address 4613 N UNIVERSITY DR

SUITE M

City-State-Zip: CORAL SPRINGS FL 33067

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: RORY O'DWYER CEO 02/01/2024

FILED Feb 01, 2024

**Secretary of State** 

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