

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000169616

Entity Name: KYLASHY LLC

Current Principal Place of Business:

220 HOSPITAL DR
FORT WALTON BEACH, FL 32548

Current Mailing Address:

216 ANGLER AVE
25
FORT WALTON BEACH, FL 32548 US

FEI Number: 82-2334092

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TAYLOR, KYRA
216 ANGLER AVE
25
FORT WALTON BEACH, FL 32548 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: KYRA TAYLOR

04/25/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name TAYLOR, KYRA
Address 216 ANGLER AVE UNIT 25
City-State-Zip: FORT WALTON BEACH FL 32548

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: TAYLOR, KYRA

OWNER

04/25/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date