

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000184246

Entity Name: BEST SHAPE SPA LLC

Current Principal Place of Business:

6645 VINELAND RD
SUITE 260
ORLANDO, FL 32819

Current Mailing Address:

6645 VINELAND RD
SUITE 260
ORLANDO, FL 32819 US

FEI Number: 83-1444028

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CKO CONSULTING AND TAX SERVICES LLC
7065 WESTPOINTE BLVD STE 303
ORLANDO, FL 32835 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 OLIVEIRA DOS SANTOS , ANDERSON

Address 6645 VINELAND RD
 SUITE 260
City-State-Zip: ORLANDO FL 32819

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: ANDERSON DOS SANTOS OLIVEIRA

MANAGER

05/01/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date