

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000251282

**Entity Name:** AMY'S STYLE ZONE, LLC

**Current Principal Place of Business:**

18 S PINE CIR  
BELLLEAIR, FL 33756

**Current Mailing Address:**

18 S PINE CIR  
BELLLEAIR, FL 33756

**FEI Number:** 83-2348231

**Certificate of Status Desired:** No

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

HARRIS, AMY G ESQ.  
18 S PINE CIR  
BELLLEAIR, FL 33756 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 HARRIS, AMY  
Address 18 S PINE CIR  
City-State-Zip: BELLLEAIR FL 33756

*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:** AMY HARRIS

**MANAGING MEMBER**

**04/22/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date