## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000096850

**Entity Name: LOVINLIFETWO LLC** 

**Current Principal Place of Business:** 

400 SW 1ST, AVE APT. 503

FORT LAUDERDALE, FL 33301

## **Current Mailing Address:**

400 SW 1ST, AVE APT. 503

FORT LAUDERDALE, FL 33301 US

FEI Number: 83-4602831 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

GILBERT, ANTHONY 400 SW 1ST AVE. APT. 503

FORT LAUDERDALE, FL 33301 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

**FILED** Apr 26, 2025

**Secretary of State** 

7872943542CC

Authorized Person(s) Detail:

Title **AMBR** Title MGR

GILBERT, ANTHONY Name Name LUDKA, LAUREN E

400 SW 1ST. AVE 1200 NE MIAMI GARDENS DR Address Address 709 W

APT. 503

City-State-Zip: FORT LAUDERDALE FL 33301 City-State-Zip: N MIAMI BEACH FL 33179

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.