

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000233004

Entity Name: DOSE OF BEAUTY SPA LLC

Current Principal Place of Business:

5669 THYER STREET
NORTH PORT , FL 34288

Current Mailing Address:

5669 THYER STREET
NORTH PORT , FL 34288 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WHITE, JUSTINE C
5669 THYER STREET
NORTH PORT , FL 34288 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 WHITE, JUSTINE C
Address 5669 THYER STREET
City-State-Zip: NORTH PORT FL 34288

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: JUSTINE WHITE

MANAGER

04/10/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date