

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000088326

Entity Name: CUTSBYTIP LLC

Current Principal Place of Business:

5901 NW 183 ST
SUITE 113
HIALEAH, FL 33015

Current Mailing Address:

5901 NW 183 ST
SUITE 113
HIALEAH, FL 33015 US

FEI Number: 85-4165090

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VOLTAIRE, LAMARTINE JR
5901 NW 183RD STREET
113
HIALEAH , FL 33015 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 VOLTAIRE, LAMARTINE
Address 5901 NORTHWEST 183RD STREET
 113
City-State-Zip: HIALEAH FL 33015

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: LAMARTINE VOLTAIRE

MANAGER

05/01/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date