

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000157689

Entity Name: THE BLACK LAB SOAPERY LLC

Current Principal Place of Business:

1500 TRUEWOOD LANE
CASSELBERRY, FL 32730

Current Mailing Address:

1500 TRUEWOOD LANE
CASSELBERRY, FL 32730 US

FEI Number: 85-1456504

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ORTIZ, CRISTINA
1500 TRUEWOOD LANE
CASSELBERRY, FL 32730 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 ORTIZ, CRISTINA
Address 1500 TRUEWOOD LANE
City-State-Zip: CASSELBERRY FL 32730

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: CRISTINA ORTIZ

OWNER

05/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date