

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000174576

**Entity Name:** LIVING GLIDE LLC

**Current Principal Place of Business:**

8225 MCVICKER AVE  
BURBANK, IL 60459

**Current Mailing Address:**

8225 MCVICKER AVE  
BURBANK, IL 60459 US

**FEI Number:** 38-4153111

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC  
7901 4TH ST N  
SUITE 300  
ST PETERSBURG, FL 33702 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:** DAVID ROBERTS

03/18/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name HAFEEZ, OKASHA  
Address 7901 4TH ST N -300  
City-State-Zip: ST PETERSBURG FL 33702

Title AMBR  
Name AHMAD SHAHID, NOOR  
Address 67 UTOPIA WAY  
City-State-Zip: BRAMPTON, ON L6P4A5

Title MANAGER  
Name HAMEED, SHAHID  
Address 8225 MCVICKER AVE.  
City-State-Zip: BURBANK IL 60459

*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:** OKASHA HAFEEZ

AMBR

03/18/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date