## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000049112

**Entity Name: SWEATLIKESTEPH LLC** 

Current Principal Place of Business:

945 SW 147 AVE MIAMI, FL 33194

**Current Mailing Address:** 

945 SW 147 AVE MIAMI, FL 33194 US

FEI Number: 87-4674720 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PASTOR, STEPHANIE M 945 SW 147 AVE MIAMI, FL 33194 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 Feb 20, 2025

**Secretary of State** 

8135512446CC

## Authorized Person(s) Detail:

Title MANAGER

Name PASTOR, STEPHANIE M

Address 945 SW 147 AVE City-State-Zip: MIAMI FL 33194

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: STEPHANIE PASTOR

**MANAGER** 

02/20/2025