

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000285232

Entity Name: SHAPE IT BODY AND FACE LLC

Current Principal Place of Business:

3719 CROFTON COURT
FORT MYERS, FL 33916

Current Mailing Address:

3719 CROFTON COURT
FORT MYERS, FL 33916

FEI Number: 32-0696737

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALSH, LETUZA
3719 CROFTON COURT
FORT MYERS, FL 33916 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 AMBR
Name WALSH, LETUZA
Address 3719 CROFTON COURT
City-State-Zip: FORT MYERS FL 33916

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: LETUZA WALSH

OWNER/MANAGER

03/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date