Name and Address of Current Registered Agent:

SIGNATURE: Electronic Signature of Registered Agent

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## Authorized Person(s) Detail :

SOUTHWEST RANCHES, FL 33331 US

DOCUMENT# L22000346585

**Current Mailing Address:** 

**FEI Number: APPLIED FOR** 

LIBURD, MARIE-CARMELLE

17440 SW 51 ST

1190 NW 95 ST SUITE 107 MIAMI, FL 33150

1190 NW 95 ST SUITE 107 MIAMI, FL 33150

Entity Name: JUST MY SIZE LLC

**Current Principal Place of Business:** 

Title	MGR	Title	MGR
Name	LIBURD, RICHARD	Name	LIBURD, MARIE-CARMELLE
Address	17440 SW 51TH ST	Address	17440 SW 51ST ST
City-State-Zip:	SOUTHWEST RANCHES FL 33331	City-State-Zip:	SOUTHWEST RANCHES FL 33331

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.

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: RICHARD LIBURD

Electronic Signature of Signing Authorized Person(s) Detail

ADMINISTRATOR/MGR 08/27/2024

Certificate of Status Desired: No

Date