

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000127501

Entity Name: ICEFIT STUDIO MEDSPA LLC

Current Principal Place of Business:

321 NORTHLAKE BLVD
SUITE 105
NORTH PALM BEACH, FL 33408

Current Mailing Address:

321 NORTHLAKE BLVD
SUITE 105
NORTH PALM BEACH, FL 33408 US

FEI Number: 92-3280485

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MCREYNOLDS, CATHY
321 NORTHLAKE BLVD
SUITE 105
NORTH PALM BEACH, FL 33408 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: CATHY MCREYNOLDS

04/25/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title CEO
Name MCREYNOLDS, CATHY R
Address 321 NORTHLAKE BLVD
SUITE 105
City-State-Zip: NORTH PALM BEACH FL 33408

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: CATHY R MCREYNOLDS

CEO

04/25/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date