

**2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F22000001854

**Entity Name:** SLI OF FLORIDA INC.

**Current Principal Place of Business:**

2265 CLEMENTS FERRY ROAD  
SUITE 303  
CHARLESTON, SC 29492

**Current Mailing Address:**

2265 CLEMENTS FERRY ROAD  
SUITE 303  
CHARLESTON, SC 29492 US

**FEI Number:** 63-1222778

**Certificate of Status Desired:** No

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

NORTHWEST REGISTERED AGENT LLC  
7901 4TH ST N STE 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:** TAYLOR NEWMAN

03/12/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT  
Name WEATHERS, JUSTIN  
Address 2265 CLEMENTS FERRY ROAD  
SUITE 303  
City-State-Zip: CHARLESTON SC 29492

Title PRESIDENT  
Name CARLTON, CHASE  
Address 2265 CLEMENTS FERRY ROAD  
SUITE 303  
City-State-Zip: CHARLESTON SC 29492

Title SECRETARY, TREASURER  
Name WEATHERS, CASEY  
Address 2265 CLEMENTS FERRY ROAD  
SUITE 303  
City-State-Zip: CHARLESTON SC 29492

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JUSTIN WEATHERS

DIRECTOR

03/12/2025

Electronic Signature of Signing Officer/Director Detail

Date