

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000066244

**Entity Name:** ASCENSION SALON LLC

**Current Principal Place of Business:**

310 W MITCHELL HAMMOCK  
100  
OVIEDO, FL 32765

**Current Mailing Address:**

524 EAGLE CIRCLE  
CASSELBERRY, FL 32707 US

**FEI Number:** 45-2493707

**Certificate of Status Desired:** No

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

PAULOVICH, EMBER  
524 EAGLE CIRCLE  
CASSELBERRY, FL 32707 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 MGRM  
Name PAULOVICH, EMBER  
Address 1241 AVALON BLVD  
City-State-Zip: CASSELBERRY FL 32707

Title MGRM  
Name PAULOVICH, JOHN J  
Address 1241 AVALON BLVD  
City-State-Zip: CASSELBERRY FL 32707

*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:** EMBER PAULOVICH

MGRM

03/29/2022

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date