

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000070001

**Entity Name:** CITY BEAUTY SUPPLY OF LEON LLC

**Current Principal Place of Business:**

3220 APALACHEE PKWY  
TALLAHASSEE, FL 32311

**Current Mailing Address:**

2594 N MONROE ST  
TALLAHASSEE, FL 32303 US

**FEI Number:** 27-1417860

**Certificate of Status Desired:** No

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

LBK ACCOUNTING SERVICES LLC  
58 SIOUX CIRCLE  
HAVANA, FL 32333 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 GRANT, RANDY  
Address 3220 APALACHEE PKWY  
City-State-Zip: TALLAHASSEE FL 32311

Title MGRM  
Name GRANT, LAWRENCE  
Address 3220 APALACHEE PKWY  
City-State-Zip: TALLAHASSEE FL 32311

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LAWRENCE GRANT

MGRM

02/14/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date