

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000047930

Entity Name: SALON RELENT LLC

Current Principal Place of Business:

439 SE PSL BLVD
111
PORT SAINT LUCIE, FL 34984

Current Mailing Address:

439 SE PSL BLVD
111
PORT SAINT LUCIE, FL 34984 US

FEI Number: 46-2422326

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

O'CARROLL, AUDRA B
5707 CASSIA DR
FORT PIERCE, FL 34982 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 O'CARROLL, AUDRA B
Address 5707 CASSIA DR
City-State-Zip: FORT PIERCE FL 34982

Title MGRM
Name O'CARROLL, TIMOTHY C
Address 5707 CASSIA DR
City-State-Zip: FORT PIERCE FL 34982

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: TIMOTHY C. O'CARROLL

MGRM

03/24/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date