### that my name appears above, or on an attachment with all other like empowered. SIGNATURE: NHUY PHAN

Electronic Signature of Signing Authorized Person(s) Detail

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

## Authorized Person(s) Detail :

Title	MGRM	Title	MGR
Name	PHAN, NHUY THANH	Name	NGUYEN, HUY
Address	12110 SW 92 ST	Address	12110 SW 92 ST
City-State-Zip:	MIAMI FL 33186	City-State-Zip:	MIAMI FL 33186

DOCUMENT# L13000066901 Entity Name: WONDER NAILS SPA LLC

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

**Current Principal Place of Business:** 

11778 SW 104TH STREET #B 1-106 MIAMI, FL 33186

## **Current Mailing Address:**

11778 SW 104TH STREET #B 1-106 MIAMI, FL 33186

### FEI Number: 46-2734536

# Name and Address of Current Registered Agent:

PHAN, NHU Y 12110 SW 92 ST MIAMI, FL 33186 US

FILED Apr 18, 2024 Secretary of State 8794567573CC

Certificate of Status Desired: No

Date

04/18/2024

MGRM

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