# 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L13000172542

#### Entity Name: BLOOM HAIR SPA LLC

## **Current Principal Place of Business:**

16681 MCGREGOR BLVD 204 FT MYERS, FL 33908

## **Current Mailing Address:**

16681 MCGREGOR BLVD **BLOOM HAIR SPA204** FORT MYERS, FL 33908 US

## FEI Number: 46-4589330

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

MADIA, JOSEPH 1136 NE PINE ISLAND RD TAXTOWN SUITE 9/10 CAPE CORAL, FL 33909 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: JOSEPH MADIA

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

Title MGR FONTANA, MARISSA Name 16681 MCGREGOR BLVD Address 204 City-State-Zip: FT MYERS FL 33908

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.

OWNER

SIGNATURE: MARISSA FONTANA

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

07/11/2023 Date

Date

07/11/2023