

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000014090

**Entity Name:** TIFFANY NICOLE [THE HAIRSTYLIST] "LLC"

**Current Principal Place of Business:**

1483 S.W. 97 LANE  
DAVIE, FL 33324

**Current Mailing Address:**

1483 S.W. 97 LANE  
DAVIE, FL 33324

**FEI Number:** 46-4790864

**Certificate of Status Desired:** No

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

KITCHEN, TIFFANY N  
1483 S.W. 97 LANE  
DAVIE, FL 33324 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 MGR  
Name KITCHEN, TIFFANY N  
Address 1483 S.W. 97 LANE  
City-State-Zip: DAVIE FL 33324

*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:** TIFFANY KITCHEN

MS.

01/11/2016

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

\_\_\_\_\_  
Date