

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000022789

**Entity Name:** REFUGE SALON LLC

**Current Principal Place of Business:**

1327 LAFAYETTE ST, UNIT B  
CAPE CORAL, AL 33904

**Current Mailing Address:**

1327 LAFAYETTE ST, UNIT B  
CAPE CORAL, FL 33904 US

**FEI Number:** 46-4766275

**Certificate of Status Desired:** No

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

VALENTI, LORI J  
608 SE 6TH TERRACE  
CAPE CORAL, FL 33990 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	Title	MGR
Name	WALSH, TARA	Name	VALENTI, LORI J
Address	1437 SW 4TH LANE	Address	608 SE 6TH TERRACE
City-State-Zip:	CAPE CORAL FL 33904	City-State-Zip:	CAPE CORAL FL 33990

*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:** LORI VALENTI

**MANAGER**

**04/24/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date