

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000022454

**Entity Name:** FACE AND BODY STUDIO, LLC

**Current Principal Place of Business:**

7819 NORTH DALE MABRY HWY  
#201  
TAMPA, FL 33614

**Current Mailing Address:**

8704 SLEEPY OAK PLACE  
TAMPA, FL 33614

**FEI Number:** 36-4833260

**Certificate of Status Desired:** Yes

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

IAKOVENKO, ANASTASIIA  
8704 SLEEPY OAK PLACE  
TAMPA, FL 33614 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:** ANASTASIIA IAKOVENKO

04/24/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name IAKOVENKO, ANASTASIIA  
Address 8704 SLEEPY OAK PLACE  
City-State-Zip: TAMPA FL 33614

Title AR  
Name WOLF, CHASE  
Address 8704 SLEEPY OAK PLACE  
City-State-Zip: TAMPA FL 33614

*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:** ANASTASIIA IAKOVENKO

**MANAGING MEMBER**

04/24/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date