

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000067422

**Entity Name:** STELLAR CUTS, LLC

**Current Principal Place of Business:**

652 NE 63RD ST.  
STE. 304  
MIAMI, FL 33138

**Current Mailing Address:**

652 NE 63RD ST.  
STE. 304  
MIAMI, FL 33138 US

**FEI Number:** 82-0948277

**Certificate of Status Desired:** No

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

CHASELAWYERS  
21 SE 1ST AVE., STE. 700  
MIAMI, FL 33131 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            AMBR  
Name            AMADO, JASON  
Address        652 NE 63RD ST., STE. 304  
City-State-Zip: MIAMI FL 33138

*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:** JASON AMADO

**PRESIDENT**

**04/09/2018**

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

\_\_\_\_\_  
Date