2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000108451

Entity Name: OLAM MED SPA, LLC

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Current Principal Place of Business:

17901 NW 5TH STREET SUITE 205

PEMBROKE PINES, FL 33029

Current Mailing Address:

17901 NW 5TH STREET SUITE 205 PEMBROKE PINES, FL 33029 US

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FEI Number: 81-2704913 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PEMBROKE PINES FL 33029

ORTIZ, LEMUEL 17901 NW 5TH STREET SUITE 205 PEMBROKE PINES, FL 33029 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Apr 09, 2019

Secretary of State

3813190216CC

Authorized Person(s) Detail:

SIGNATURE: JHONY PEDRIQUE

Title AMBR Title AMBR

Name PEDRIQUE, JHONY Name GRACEFUL BEAUTY CONCEPTS, LLC

Address 17901 NW 5TH STREET Address 17901 NW 5TH STREET

SUITE 205

City-State-Zip: PEMBROKE PINES FL 33029

AMBR

SUITE 205

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.