

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000113720

**Entity Name:** TRINITY NAIL SPA, LLC

**Current Principal Place of Business:**

10900 STATE ROAD 54  
SUITE 103  
NEW PORT RICHEY, FL 34655

**Current Mailing Address:**

7649 CRESCENT PALM DRIVE  
WESLEY CHAPEL, FL 33545

**FEI Number:** 82-1652899

**Certificate of Status Desired:** No

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

LE, TIFFANY P  
7649 CRESCENT PALM DRIVE  
WESLEY CHAPEL, FL 33545 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 LE, TIFFANY P  
Address 7649 CRESCENT PALM DRIVE  
City-State-Zip: WESLEY CHAPEL FL 33545

*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 P LE

**OWNER**

**04/27/2023**

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

\_\_\_\_\_  
Date