

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000161819

**Entity Name:** FACIAL FINESSE, LLC

**Current Principal Place of Business:**

18001 SW 68 CT.  
SOUTHWEST RANCHES, FL 33331

**Current Mailing Address:**

18001 SW 68 CT.  
SOUTHWEST RANCHES, FL 33331

**FEI Number:** 82-2321366

**Certificate of Status Desired:** No

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

HODGERS, SELENA  
18001 SW 68 CT.  
SOUTHWEST RANCHES, FL 33331 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	ASSISTANT MANAGER
Name	HODGERS, SELENA	Name	HODGERS, BENJAMIN
Address	18001 SW 68 CT.	Address	18001 SW 68 CT.
City-State-Zip:	SOUTHWEST RANCHES FL 33331	City-State-Zip:	SOUTHWEST RANCHES FL 33331

*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:** SELENA HODGERS

**PRESIDENT**

**02/09/2020**

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

\_\_\_\_\_  
Date