

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000184353

**Entity Name:** LA FONT D'MED SPA LLC

**Current Principal Place of Business:**

207 NORTH COLLIER BLVD SUITE A  
MARCO ISLAND, FL 34145

**Current Mailing Address:**

1104 CEDAR CT  
MARCO ISLAND, FL 34145 US

**FEI Number:** 82-2618555

**Certificate of Status Desired:** No

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

BRUCE H. VANDERLAAN, ATTORNEY AT LAW PA  
1500 ROYAL PALM SQUARE BLVD  
STE 101  
FORT MYERS, FL 33919 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 ALBERTI DE PUELL, REBECCA  
Address 1104 CEDAR CT  
City-State-Zip: MARCO ISLAND FL 34145

*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:** REBECCA ALBERTI DE PUELL

AMBR

02/28/2020

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

\_\_\_\_\_ Date