

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000190510

Entity Name: CLAIRES WELLNESS & NUTRITION LLC

Current Principal Place of Business:

7897 VENTURE CENTER WAY
BOYNTON BEACH, FL 33437

Current Mailing Address:

7897 VENTURE CENTER WAY
BOYNTON BEACH, FL 33437

FEI Number: 83-1495525

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PHILIPPE, CLAIREMATHE
7897 VENTURE CENTER WAY
BOYNTON BEACH, FL 33437 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 PHILIPPE, CLAIREMATHE
Address 7897 VENTURE CENTER WAY
City-State-Zip: BOYNTON BEACH FL 33437

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: CLAIREMATHE PHILIPPE

OWNER

06/07/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date