

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000280964

Entity Name: L KOUTURE XTENSIONS LIMITED LIABILITY COMPANY

Current Principal Place of Business:

546 NE LEON ST.
LAKE CITY, FL 32055

Current Mailing Address:

546 NE LEON ST.
LAKE CITY, FL 32055 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAK COURT
A
TAMPA, FL 33612 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 GADDY, ALRON
Address 546 NE LEON ST.
City-State-Zip: LAKE CITY FL 32055

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: ALRON GADDY

OWNER

04/29/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date