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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: JAHLET JONES

Name and Address of Current Registered Agent:

JONES, JAHLET 8012 STIRRUPWOOD CT. ORLANDO, FL 32818 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

Authorized Person(s) Detail :

Title MANAGER JONES. JAHLET Name Address 8012 STIRRUPWOOD CT City-State-Zip: ORLANDO FL 32818-8201

LMT

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L19000101105

Entity Name: FORGET ME KNOT MASSAGE AND BODYWORK

Current Principal Place of Business:

1515 ORLANDO AVE J MAITLAND, FLORIDA, FL 32751

Current Mailing Address:

8012 STIRRUPWOOD CT. ORLANDO, FL 32818

FEI Number: 27-4967700

Certificate of Status Desired: Yes

Date

FILED Jun 07, 2020 Secretary of State 3099223467CC

Date

06/07/2020