Name and Ad	dress of Current Registered Agent:
GUZMAN, NATAL 3 S JOHN YOUNG KISSIMMEE, FL 3	S PKWY SUITE 1
The above named e	ntity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of F
SIGNATURE:	NATALIE GUZMAN
	Electronic Signature of Degistered Agent

## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000115603

Entity Name: NAILS EXCLUSIVE GLITTERS L.L.C

# **Current Principal Place of Business:**

4471 WEST VINE STREET KISSIMMEE, FL 34746

#### **Current Mailing Address:**

4471 WEST VINE STREET KISSIMMEE, FL 34746 US

# FEI Number: 85-4043569

## Name

	Electronic Signature of Registered Agent			
Authorized Person(s) Detail :				
Title	MANAGER	Title	MGR	
Name	TORRES MARTORONY, VANESSA	Name	ARROYO ROSS, WILLIAM E.	
Address	726 BENJAMIN TRAIL	Address	726 BENJAMIN TRAIL	
City-State-Zip:	DAVENPORT FL 33837	City-State-Zip:	DAVENPORT FL 33837	

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: VANESSA TORRES MARTORONY

MGR

01/05/2021 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 05, 2021 Secretary of State 8411054417CC

> 01/05/2021 Date

Certificate of Status Desired: No