## **2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000115788

Entity Name: IBLINK OF LASHES LLC

**Current Principal Place of Business:** 

3307 VERBENA AVE WINTER HAVEN, FL 33881

**Current Mailing Address:** 

3307 VERBENA AVE

WINTER HAVEN. FL 33881 US

FEI Number: 83-3646509 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLINCY, CHANDREAS N 3307 VERBENA AVE WINTER HAVEN, FL 33881 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

FILED Apr 30, 2023

**Secretary of State** 

5033171073CC

## Authorized Person(s) Detail:

Title MGR

Name CLINCY, CHANDREAS N Address 3307 VERBENA AVE

City-State-Zip: WINTER HAVEN FL 33881

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: CHANDREAS CLINCY

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER 04/30/2023

Date