

2021 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
3151 WOODHILL CT
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

Authorized Person(s) Detail :

Title MGR
Name CLINCY, CHANDREAS N
Address 3151 WOODHILL CT
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 N CLINCY

MANAGER

05/01/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date