## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000323620

Entity Name: BLACKMANE SKINCARE LLC

**Current Principal Place of Business:** 

311145TH STREET SUITE 11

WEST PALM BEACH, FL 33407

## **Current Mailing Address:**

12381 72ND CT N WEST PALM BEACH, FL 33412 US

FEI Number: 85-3082047 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DENTON, MAURICEA 311145TH STREET SUITE 11 WEST PALM BEACH, FL 33407 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 01, 2024

**Secretary of State** 

4834851459CC

## Authorized Person(s) Detail:

Title MANAGER

DENTON, MAURICEA Name

12381 72ND CT Address

City-State-Zip: WEST PALM BEACH FL 33412

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: MAURICEA DENTON