## 2023 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:**

13691 ISHNALA CIRCLE WELLINGTON, FL 33414 US

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

## Name and Address of Current Registered Agent:

DENTON, MAURICEA 3111 45TH 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 04, 2023

**Secretary of State** 

9838403030CC

## Authorized Person(s) Detail:

Title MANAGER

Name DENTON, MAURICEA
Address 13691 ISHNALA CIRCLE
City-State-Zip: WELLINGTON FL 33414

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.

**MANAGER** 

Electronic Signature of Signing Authorized Person(s) Detail