

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000326669

Entity Name: JAZMIN MASSAGE THERAPY, L.L.C**Current Principal Place of Business:**9831MARTINIQUE DRIVE
CUTLER BAY, FL 33189**Current Mailing Address:**9831MARTINIQUE DRIVE
CUTLER BAY, FL 33189 US**FEI Number:** 86-3255382**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**VALENCIA, LEIDY AMANDA
9831MARTINIQUE DRIVE
CUTLER BAY, FL 33189 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 RA
Name VALENCIA, LEIDY AMANDA
Address 9831MARTINIQUE DRIVE
City-State-Zip: CUTLER BAY FL 33189

Title MGR
Name PACHECO, INGRID JOHANNA
Address 9831 MARINIQUE DR
City-State-Zip: MIAMI FL 33189

Title MGR
Name PACHECO, CAROLINA MARIA
Address 9831MARTINIQUE DRIVE
City-State-Zip: CUTLER BAY FL 33189

Title MGR
Name PACHECO, ANDRES FELIPE
Address 9831MARTINIQUE DRIVE
City-State-Zip: CUTLER BAY FL 33189

Title MGR
Name PACHECO, ANGEL DAVID
Address 9831MARTINIQUE DRIVE
City-State-Zip: CUTLER BAY FL 33189

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: LEIDY AMANDA VALENCIA

RA

02/04/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date