

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000364928

**Entity Name:** AMORE SKIN AESTHETICS & WEIGHT LOSS LLC

**Current Principal Place of Business:**

6356 MANOR LANE  
104  
SOUTH MIAMI , FL 33143

**Current Mailing Address:**

6356 MANOR LANE  
104  
SOUTH MIAMI , FL 33143 US

**FEI Number:** 85-3850137

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FERNANDEZ, TATIANA  
6356 MANOR LANE  
SUITE 104  
MIAMI, FL 33143 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      PRESIDENT, MANAGER, DIRECTOR  
Name      FERNANDEZ, TATIANA  
Address    6356 MANOR LANE  
            104  
City-State-Zip: SOUTH MIAMI FL 33143

Title      MGR  
Name      FERNANDEZ, TATIANA  
Address    6356 MANOR LANE SUITE 104  
City-State-Zip: MIAMI FL 33143

Title      AUTHORIZED MEMBER  
Name      JANET, WOODRUFF  
Address    6356 MANOR LANE  
            104  
City-State-Zip: SOUTH MIAMI FL 33143

Title      MGR  
Name      WOODRUFF, JANET  
Address    6356 MANOR LANE SUITE 104  
City-State-Zip: MIAMI FL 33143

*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:** TATIANA FERNANDEZ

**MANAGER**

**04/11/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date