

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000104286

**Entity Name:** SUN ROSE NAILS & SPA LLC

**Current Principal Place of Business:**

12529 YELLOW BLUFF RD STE 3  
JACKSONVILLE, FL 32226

**Current Mailing Address:**

12529 YELLOW BLUFF RD STE 3  
JACKSONVILLE, FL 32226 US

**FEI Number:** 86-3196049

**Certificate of Status Desired:** No

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

VOTRAN, HOANG  
12529 YELLOW BLUFF RD STE 3  
JACKSONVILLE, FL 32226 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 VOTRAN, HOANG  
Address 12529 YELLOW BLUFF RD STE 3  
City-State-Zip: JACKSONVILLE FL 32226

Title MGR  
Name VOTRAN, PHUONG  
Address 12529 YELLOW BLUFF RD  
STE 3  
City-State-Zip: JACKSONVILLE FL 32226

*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:** HOANG VOTRAN

**MANAGER**

**01/15/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date