

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000109693

**Entity Name:** PHYSIQUE ALLURE LLC

**Current Principal Place of Business:**

5043 NORMANDY BLVD  
JACKSONVILLE, FL 32205

**Current Mailing Address:**

8815 OXFORDSHIRE AVE  
JACKSONVILLE, FL 32219 US

**FEI Number:** 86-2914767

**Certificate of Status Desired:** No

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

FRAZIER, SYTERIA  
8815 OXFORDSHIRE AVE E  
JACKSONVILLE, FL 32219 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:** SYTERIA FRAZIER

04/30/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MANAGER
Name	FRAZIER, SYTERIA L	Name	HOLT, BERNICE
Address	8815 OXFORDSHIRE AVE E	Address	8815 OXFORDSHIRE AVE
City-State-Zip:	JACKSONVILLE FL 32219	City-State-Zip:	JACKSONVILLE FL 32219

*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:** SYTERIA FRAZIER

MANAGER

04/30/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date