

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000329323

Entity Name: LIBELLE SPA, LLC**Current Principal Place of Business:**9500 W BAY HARBOR DR
APT 2H
BAY HARBOR ISLAND, FL 33154**Current Mailing Address:**9500 W BAY HARBOR DR
APT 2H
BAY HARBOR ISLAND, FL 33154 US**FEI Number:** 61-2004961**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CAROLINA, RAMIREZ
9500 W BAY HARBOR DR
APT 2H
BAY HARBOR ISLAND, FL 33154 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 MGRM
Name UGUETO, MARIA VICTORIA
Address 9500 W BAY HARBOR DR
APT 2H
City-State-Zip: BAY HARBOR ISLAND FL 33154

Title MGR
Name CAROLINA, RAMIREZ
Address 9500 W BAY HARBOR DR
APT 2H
City-State-Zip: BAY HARBOR ISLAND FL 33154

Title AP
Name WALTER, LARA
Address 9500 W BAY HARBOR DR
APT 2H
City-State-Zip: BAY HARBOR ISLAND FL 33154

Title AP
Name MARIA ALEJANDRA, APARATO
Address 9500 W BAY HARBOR DR
APT 2H
City-State-Zip: BAY HARBOR ISLAND FL 33154

Title AP
Name EGAR, FLEITAS
Address 9500 W BAY HARBOR DR
APT 2H
City-State-Zip: BAY HARBOR ISLAND FL 33154

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: CAROLINA RAMIREZ

MGR

01/23/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date