## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000341379

Entity Name: LASH OBSESSIONS LLC

**Current Principal Place of Business:** 

2646 SOUTHWEST MAPP ROAD SUITE 205

PALM CITY, FL 34990

**Current Mailing Address:** 

2646 SOUTHWEST MAPP ROAD SUITE 205 PALM CITY, FL 34990 US

FEI Number: 87-1993619 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZENBUSINESS INC. 336 E. COLLEGE AVE. SUITE 301 TALLAHASSEE, FL 32301 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: KHADIJEH HEMMATI 04/25/2025 Date

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title **AMBR** 

RAPP, ELIANE Name

2646 SOUTHWEST MAPP ROAD Address

SUITE 205

City-State-Zip: PALM CITY FL 34990

SIGNATURE: ELIANE RAPP

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.

Electronic Signature of Signing Authorized Person(s) Detail

MEMBER, AUTHORIZED **SIGNATORY** 

04/25/2025

**FILED** Apr 25, 2025

**Secretary of State** 

9796669513CC

Date