

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000515007

**Entity Name:** ALPENGLOW HAIR STUDIO LLC

**Current Principal Place of Business:**

304 3RD STREET SW  
SUITE 12  
WINTER HAVEN, FL 33880

**Current Mailing Address:**

304 3RD STREET SW  
SUITE 12  
WINTER HAVEN, FL 33880

**FEI Number:** 87-3902334

**Certificate of Status Desired:** Yes

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

COSGROVE, ANNA M  
365 E CUMMINGS ST  
LAKE ALFRED, FL 33850 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            SBO  
Name            COSGROVE, ANNA M  
Address        365 E CUMMINGS ST  
City-State-Zip: LAKE ALFRED FL 33850

*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:** ANNA MARIE COSGROVE

SBO

04/09/2022

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

\_\_\_\_\_ Date