## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000277175

Entity Name: WINDI'S NAIL STUDIO LLC

**Current Principal Place of Business:** 

21300 SOUTH BRANCH BLVD. UNIT 6119 SUITE 111 ESTERO, FL 33928

**Current Mailing Address:** 

12931 SHAWNEE RD. FORT MYERS, FL 33913-9654 US

FEI Number: 88-2868138 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THOMPSON, WINDI E 12931 SHAWNEE RD. FT MYERS, FL 33913 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

**FILED** Mar 16, 2025

**Secretary of State** 

2413973726CC

## Authorized Person(s) Detail:

Title MGR

THOMPSON, WINDI E Name Address 12931 SHAWNEE RD City-State-Zip: FORT MYERS FL 33913

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: WINDI THOMPSON **OWNER** 

Electronic Signature of Signing Authorized Person(s) Detail

03/16/2025

Date