

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000415363

Entity Name: LAVISH LASER HOLDINGS LLC**Current Principal Place of Business:**3160 FLORIDA AVE
MIAMI, FL 33133**Current Mailing Address:**3160 FLORIDA AVE
MIAMI, FL 33133 US**FEI Number:** 92-0486181**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GARCIA, SENEN ESQ
2665 S. BAYSHORE DR.,
STE. 220
MIAMI, FL 33133 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 | MGR |
| Name | SIEGRIST, DENNIS |
| Address | 2700 SW 27TH AVE APT 1202 |
| City-State-Zip: | MIAMI FL 33133 |

| | |
|-----------------|----------------|
| Title | MGR |
| Name | SANDOVAL, JUAN |
| Address | 2965 RUTH ST |
| City-State-Zip: | MIAMI FL 33133 |

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|-----------------|--------------------|
| Title | MGR |
| Name | SANDOVAL, ANGELICA |
| Address | 2965 RUTH ST |
| City-State-Zip: | MIAMI FL 33133 |

| | |
|-----------------|------------------|
| Title | MGR |
| Name | SIEGRIST, RACHEL |
| Address | 2700 SW 27TH AVE |
| City-State-Zip: | MIAMI FL 33133 |

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: SIEGRIST, DENNIS

MGR

01/24/2023

Electronic Signature of Signing Authorized Person(s) Detail_____
Date