

**2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L22000509157

**Entity Name:** NAILS SPA PRUM LLC

**Current Principal Place of Business:**

1266 PALM COAST PARKWAY  
PALM COAST, FL 32137

**Current Mailing Address:**

5 LEWIS DR  
PALM COAST, FL 32137 US

**FEI Number:** 88-4321208

**Certificate of Status Desired:** No

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

PRUM, RANDY R  
1266 PALM COAST PARKWAY  
PALM COAST, FL 32137 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	Title	OWNER
Name	PAO, SOKHA	Name	PRUM, RANDY R
Address	5 LEWIS DR	Address	5 LEWIS DR
City-State-Zip:	PALM COAST FL 32137	City-State-Zip:	PALM COAST FL 32137

*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:** PAO , SOKHA

**MGR**

**04/30/2024**

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

\_\_\_\_\_  
Date