

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000033048

**Entity Name:** NAILSBYMO LLC

**Current Principal Place of Business:**

3651 WINKLER AVE  
1622  
FORT MYERS, 33916

**Current Mailing Address:**

3651 WINKLER AVE  
1622  
FORT MYERS, 33916 UN

**FEI Number:** 92-1965394

**Certificate of Status Desired:** No

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

RODRIGUEZ, MONICA L  
3651 WINKLER AVE  
1622  
IMMOKALEE, FL 34142 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            AMBR  
Name            RODRIGUEZ, MONICA L  
Address        3651 WINKLER AVE  
                  1622  
City-State-Zip: FT MYERS FL 33916

*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:** MONICA RODRIGUEZ

MS

04/30/2024

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

\_\_\_\_\_  
Date