

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000419981

**Entity Name:** BODY ACNE MIAMI LLC

**Current Principal Place of Business:**

10856 SW 104TH ST STE 113  
MIAMI, FL 33176

**Current Mailing Address:**

10856 SW 104TH ST STE 113  
MIAMI, FL 33176 US

**FEI Number:** 93-3360975

**Certificate of Status Desired:** No

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

GOMEZ, NICOLE  
10856 SW 104TH ST STE 113  
MIAMI, FL 33176 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 MBR  
Name GOMEZ, NICOLE  
Address 10856 SW 104TH ST STE 113  
City-State-Zip: MIAMI FL 33176

*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:** NICOLE GOMEZ

**MANAGING MEMBER**

**04/29/2024**

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

\_\_\_\_\_  
Date