

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000288138

Entity Name: NUOVA FACCIA ESTHETICS L.L.C.

Current Principal Place of Business:

1501 MARYLAND AVE
ST CLOUD, FL 34769

Current Mailing Address:

1501 MARYLAND AVE
ST CLOUD, FL 34769

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANTIAGO, VICTOR
1501 MARYLAND AVE
ST CLOUD, FL 34769 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	AMBR
Name	SANTIAGO, VICTOR	Name	RIVERA, TRIXY
Address	1501 MARYLAND AVE	Address	1501 MARYLAND AVE
City-State-Zip:	ST CLOUD FL 34769	City-State-Zip:	ST CLOUD FL 34769

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: VICTOR SANTIAGO

MGMR

02/05/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date