

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000015373

FILED
Mar 29, 2009
Secretary of State

Entity Name: AMICI SALON & SPA WP, LLC

Current Principal Place of Business:

480 NORTH ORLANDO AVE.
SUITE 112
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

1468 TUSKAWILLA ROAD
WINTER SPRINGS, FL 32708

New Mailing Address:

11506 SWIFT WATER CIR
ORLANDO, FL 32817

FEI Number: 20-1324011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHLES, MARCUS R
11506 SWIFT WATER CIR
ORLANDO, FL 32817 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: CHMN () Delete
Name: MICHLES, MARCUS R
Address: 11506 SWIFT WATER CIR
City-St-Zip: ORLANDO, FL 32817

Title: CEO () Delete
Name: MICHLES, JUDY
Address: 11506 SWIFT WATER CIR
City-St-Zip: ORLANDO, FL 32817

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: MARCUS R. MICHLES

CHMN

03/29/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date