

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000062061

**FILED**  
**May 10, 2012**  
**Secretary of State**

**Entity Name:** LUSH LASH LLC

**Current Principal Place of Business:**

149 MEADOW BLVD  
SANFORD, FL 32771

**New Principal Place of Business:**

697 DOUGLAS AVE  
697 DOUGLAS AVE  
ALTAMONTE SPRINGS, FL 32771 US

**Current Mailing Address:**

149 MEADOW BLVD  
SANFORD, FL 32771

**New Mailing Address:**

**FEI Number:** 27-1419639

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SWIFT, ROCHELL L  
149 MEADOW BLVD  
SANFORD, FL FL 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: MS.  
Name: SWIFT, LYNN ROCHELL  
Address: 149 MEADOW BLVD  
City-St-Zip: SANFORD, FL 32771 US

I hereby 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: ROCHELL L SWIFT

CEO

05/10/2012

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