

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000041582

**Entity Name:** MARYLUZE BELLA & SPA, LLC

**Current Principal Place of Business:**

16445 SW 84 LANE  
MIAMI, FL 33193

**FILED**  
**Apr 30, 2015**  
**Secretary of State**  
**CC4252037517**

**Current Mailing Address:**

16445 SW 84 LANE  
MIAMI, FL 33193

**FEI Number: 46-5522194**

**Certificate of Status Desired: Yes**

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

ENCARNACION, MARY L  
16445 SW 84 LN  
MIAMI, FL 33193 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  
Name            ENCARNACION, MARY L  
Address        16445 SW 84 LN  
City-State-Zip: MIAMI FL 33193

*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: MARY L. ENCARNACION**

**MGR**

**04/30/2015**

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

\_\_\_\_\_  
Date