

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000114759

Entity Name: ALLURE MEDSPA, LLC

Current Principal Place of Business:

4700 NW 2ND AVENUE
103
BOCA RATON, FL 33431

Current Mailing Address:

4700 NW 2ND AVENUE
103
BOCA RATON, FL 33431 US

FEI Number: 47-1418337

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHWARTZMANN, HEATHER
4700 NW 2ND AVENUE
103
BOCA RATON, FL 33431 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 SCHWARTZMANN, HEATHER
Address 4700 NW 2ND AVENUE
103
City-State-Zip: BOCA RATON FL 33431

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: HEATHER SCHWARTZMANN

MGR

01/27/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date