

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000160444

**Entity Name:** INSPIRED CREATIONS BEAUTY SALON, LLC.

**Current Principal Place of Business:**

342 N MAGNOLIA AVE  
OCALA, FL 34471

**Current Mailing Address:**

342 N MAGNOLIA AVE  
OCALA, FL 34471

**FEI Number:** 47-2113626

**Certificate of Status Desired:** No

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

FARMER-GARMON, MONICA J  
2203 SW 4TH ST  
OCALA, FL 34471 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:** MONICA FARMER-GARMON

06/29/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                         |                 |                 |
|-----------------|-------------------------|-----------------|-----------------|
| Title           | MGR                     | Title           | AR              |
| Name            | FARMER-GARMON, MONICA J | Name            | GARMON, FREDDIE |
| Address         | 2203 SW 4TH ST          | Address         | 2203 SW 4TH ST  |
| City-State-Zip: | OCALA FL 34471          | City-State-Zip: | OCALA FL 34471  |

*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:** MONICA FARMER-GARMON

OWNER

06/29/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date