

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000213027

**Entity Name:** GEL NAILS & SPA OF LEHIGH LLC

**Current Principal Place of Business:**

5705 LEE BLVD.  
3  
LEHIGH ACRES, FL 33971

**Current Mailing Address:**

5705 LEE BLVD.  
3  
LEHIGH ACRES, FL 33971 US

**FEI Number:** 46-5584251

**Certificate of Status Desired:** No

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

VIEN, NHU  
5705 LEE BLVD.  
3  
LEHIGH ACRES, FL 33971 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 VIEN, NHU  
Address 5705 LEE BLVD, SUITE 3  
City-State-Zip: LEHIGH ACRES FL 33971

*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:** NHU VIEN

OWNR

02/04/2017

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

\_\_\_\_\_  
Date