

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000033785

**Entity Name:** HONEYGLAM L.L.C.

**Current Principal Place of Business:**

723 BELVEDERE RD #2  
SALON U  
WEST PALM BEACH , FL 33405

**Current Mailing Address:**

1791 NE MIAMI GARDENS DRIVE  
APT 703  
MIAMI, FL 33179 US

**FEI Number:** 81-1483385

**Certificate of Status Desired:** No

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

WHITE, SARAH  
1791 NE MIAMI GARDENS DR  
703  
MIAMI, FL 33179 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           MANAGER/AUTHORIZED  
                  REPRESENTITIVE  
Name            WHITE, SARAH  
Address         1791 NE MIAMI GARDENS DRIVE  
                  APT 703  
City-State-Zip: MIAMI FL 33179

*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:** SARAH WHITE

**MANAGER**

**04/21/2024**

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

\_\_\_\_\_  
Date