

2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L16000210771

Entity Name: MASTER LASH LLC

Current Principal Place of Business:

2030 SOUTH OCEAN DR
APT 1214
HALLANDALE, FL 33009

Current Mailing Address:

2030 SOUTH OCEAN DR
APT 1214
HALLANDALE, FL 33009 US

FEI Number: 81-4896260

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORCINO, YAMIRA
2030 SOUTH OCEAN DR
APT 1214
HALLANDALE, FL 33009 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: YAMIRA CORCINO

10/25/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name CORCINO, YAMIRA
Address 2030 S OCEAN DR APT 1214
City-State-Zip: HALLANDALE FL 33009

Title MGR
Name CORCINO, YAMARIS
Address 1945 SOUTH OCEAN DR
APT 505
City-State-Zip: HALLANDALE FL 33009

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: YAMIRA CORCINO

MGR

10/25/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date