

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000027834

**Entity Name:** WOW! MY DAY SPA LLC.

**Current Principal Place of Business:**

5905 S SR 7 STE B  
LAKE WORTH, FL 33449

**Current Mailing Address:**

5905 S SR 7 STE B  
LAKE WORTH, FL 33449 US

**FEI Number:** 81-5449889

**Certificate of Status Desired:** No

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

WOW! MY DAY SPA  
5905 S SR 7 STE B  
LAKE WORTH, FL 33449 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:** SOPHIE HAULOTTE

03/08/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                     |                 |                     |
|-----------------|---------------------|-----------------|---------------------|
| Title           | MGR                 | Title           | MANAGER             |
| Name            | HAULOTTE, KRIS      | Name            | HAULOTTE, SOPHIE    |
| Address         | 7399 WESCOTT TERR   | Address         | 5905 S SR 7 STE B   |
| City-State-Zip: | LAKE WORTH FL 33467 | City-State-Zip: | LAKE WORTH FL 33449 |

*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:** SOPHIE HAULOTTE

OWNER

03/08/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date