

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000019994

Entity Name: LE LASH & BROW LLC

Current Principal Place of Business:

4723 W. ATLANTIC AVE
A2
DELRAY BEACH, FL 33445

Current Mailing Address:

4883 N. CLASSICAL BLVD
DELRAY BEACH, FL 33445 US

FEI Number: 83-3085031

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LE, NINA
4883 N. CLASSICAL BLVD
DELRAY BEACH, FL 33445 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 MG
Name LE, NINA
Address 4883 N. CLASSICAL BLVD
City-State-Zip: DELRAY BEACH FL 33445

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: NINA LE

04/16/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date