

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000027798

Entity Name: JENNIE EVANS NATURAL MED SPA LLC

Current Principal Place of Business:

23 JACKSON AVENUE N
JACKSONVILLE, FL 32220

Current Mailing Address:

9901 CISCO DRIVE
JACKSONVILLE, FL 32219

FEI Number: 06-1667327

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EVANS, FAYE T
9901 CISCO DRIVE
JACKSONVILLE, FL 32219 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 EVANS, FAYE T
Address 9901 CISCO DRIVE
City-State-Zip: JACKSONVILLE FL 32219

Title MGR
Name TIPTON, JENNIE E
Address 9901-2 CISCO DRIVE
City-State-Zip: JACKSONVILLE FL 32219

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: FAYE T EVANS

MANAGER

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date