

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000002246

**Entity Name:** KL COBE NAILS & SPA LLC

**Current Principal Place of Business:**

17961 US HWY 27/441  
SUMMERFIELD, FL 34491

**Current Mailing Address:**

17961 US HWY 27/441  
SUMMERFIELD, FL 34491 US

**FEI Number:** 84-4174585

**Certificate of Status Desired:** No

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

NHIEU, KEN  
15830 SE 92ND TER  
SUMMERFIELD, FL 34491 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 AMBR  
Name NHIEU, KEN  
Address 15830 SE 92ND TER  
City-State-Zip: SUMMERFIELD FL 34491

Title AMBR  
Name NGUYEN, LAI  
Address 16315 SE 92ND AVE  
City-State-Zip: SUMMERFIELD FL 34491

*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:** KEN NHIEU

MBR

03/15/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date