

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000090480

**Entity Name:** CAROLYNSKINCARE,LLC

**Current Principal Place of Business:**

2451 HOWELL MARKET LN  
SUITE 1115  
WINTER PARK, FL 32792

**Current Mailing Address:**

2451 HOWELL MARKET LN  
SUITE 1115  
WINTER PARK, FL 32792 US

**FEI Number:** 85-0531319

**Certificate of Status Desired:** No

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

HALL, CAROLYN S  
2222 FLAGLER PROMENADE WAY  
102  
MAITLAND, FL 32751 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 HALL, CAROLYN S  
Address 2204 FLAGLER PROMENADE WAY  
APT 102  
City-State-Zip: MAITLAND FL 32751

Title AUTHORIZE MEMBER  
Name DAUPHIN, ERIC  
Address 1080 SHEELER OAKS DRIVE  
City-State-Zip: APOPKA FL 32703

*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:** HALL, CAROLYN S

**MANAGER**

**04/30/2022**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date