

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000211935

**Entity Name:** SALON HONEY & SAGE LLC

**Current Principal Place of Business:**

389 PASEO REYES DR  
SUITE 204  
ST AUGUSTINE, FL 32095

**Current Mailing Address:**

83 SILVER CREEK PLACE  
ST AUGUSTINE, FL 32095 US

**FEI Number:** 85-2246809

**Certificate of Status Desired:** No

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

ACCOUNTING SOLUTIONS OF ST. AUGUSTINE INC  
2730 US 1 SOUTH  
SUITE B  
SAINT AUGUSTINE, FL 32086 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 MCKENNON, KRISTEN  
Address 76 SILVER CREEK PLACE  
City-State-Zip: ST AUGUSTINE FL 32095

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:** KRISTEN MCKENNON

**OWNER**

**04/21/2023**

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

\_\_\_\_\_  
Date