

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000261091

Entity Name: ICONCIERGE MEDSPA LLC

Current Principal Place of Business:

5831 DENVER STREET NE
SAINT PETERSBURG, FL 33703

Current Mailing Address:

5831 DENVER STREET NE
SAINT PETERSBURG, FL 33703

FEI Number: 86-2318245

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHWYN TRASTER, ANGELINA
5831 DENVER STREET NE
SAINT PETERSBURG, FL 33703 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 AUTHORIZED MEMBER
Name FERRARO, AMBER
Address 1318 5TH TERRACE NW
City-State-Zip: LARGO FL 33770

Title AUTHORIZED MEMBER
Name SCHWYN TRASTER, ANGELINA
Address 5831 DENVER STREET NE
City-State-Zip: ST PETERSBURG FL 33703

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: AMBER FERRARO

AMBR

03/02/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date