

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000025525

**Entity Name:** BEAUTY LUSH AESTHETICS LLC

**Current Principal Place of Business:**

201 N UNIVERSITY DRIVE  
SUITE 114  
PALNTATION, FL 33324

**Current Mailing Address:**

PO BOX 773842  
CORAL SPRINGS, FL 33077 US

**FEI Number:** 86-2315585

**Certificate of Status Desired:** No

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

HARROLD, SAMUEL C  
17166 NE 19TH AVE  
NORTH MIAMI BEACH, FL 33162 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 AYODELE, CHESTCY  
Address PO BOX 773842  
City-State-Zip: CORAL SPRINGS FL 33077

*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:** CHESTCY AYODELE

MGR

04/25/2025

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

\_\_\_\_\_  
Date