

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000388748

**Entity Name:** LA SPA AND WELLNESS SUITES, LLC

**Current Principal Place of Business:**

2154 DUCK SLOUGH BLVD  
SUITE 101  
TRINITY, FL 34655

**Current Mailing Address:**

14907 PRINCEWOOD LANE  
LAND O LAKES, FL 34638 US

**FEI Number:** 88-2044929

**Certificate of Status Desired:** No

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

LA LASH AND BROW STUDIO, LLC  
14907 PRINCEWOOD LANE  
LAND O LAKES, FL 34638 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            MALHOTRA, LORIANN  
Address        14907 PRINCEWOOD LANE  
City-State-Zip: LAND O LAKES FL 34638

*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:** LORIANN MALHOTRA

MGR

03/17/2023

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

\_\_\_\_\_ Date