# 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: STEVE NGUYEN

Electronic Signature of Signing Authorized Person(s) Detail

# The above named entity submits this statement for the SIGNATURE:

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.

## Electronic Signature of Registered Agent

Authorized Person(s) Detail :			
Title	MGR	Title	MGR
Name	HOANG, MY H	Name	NGUYEN, STEVE L
Address	5332 CYPRESS RESERVE PL	Address	5332 CYPRESS RESERVE PL
City-State-Zip:	WINTER PARK FL 32792	City-State-Zip:	WINTER PARK FL 32792

### 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000520318

Entity Name: WINTER PARK BLISS NAIL SPA LLC

#### **Current Principal Place of Business:**

115 ORLANDO AVE 101 WINTER PARK, FL 32789

#### **Current Mailing Address:**

115 ORLANDO AVE 101 WINTER PARK, FL 32789

#### FEI Number: 87-3906234

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

HOANG, MY H 5332 CYPRESS RESERVE PL WINTER PARK, FL 32792 US

Date

#### FILED Mar 20, 2023 Secretary of State 5755649885CC

Certificate of Status Desired: No

MANAGER