# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000352500

Entity Name: MAGIC HANDS STUDIO LLC

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

160 CYPRESS POINT PKWY SUITE B303 PALM COAST, FL 32137

# **Current Mailing Address:**

21 BIRCHBARK LANE PALM COAST, FL 32137

# FEI Number: NOT APPLICABLE

## Name and Address of Current Registered Agent:

RESTREPO, ASTRID 21 BIRCHBARK LANE PALM COAST, FL 32137 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

## Authorized Person(s) Detail :

Title	MGR	Title	AMBR
Name	RESTREPO, ASTRID	Name	ZULUAGA, OSCAR
Address	21 BIRCHBARK LANE	Address	21 BIRCHBARK LANE
City-State-Zip:	PALM COAST FL 32137	City-State-Zip:	PALM COAST FL 32137

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: ASTRID RESTREPO

OWNER

04/30/2024 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 30, 2024 Secretary of State 2235935556CC

Date

Certificate of Status Desired: Yes