I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic sign oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute the second secon	
that my name appears above, or on an attachment with all other like empowered.	

SIGNATURE: TERRELL SWANSON

CEO

Electronic Signature of Signing Authorized Person(s) Detail

ST JOHNS, FL 32259

Current Mailing Address:

185 DURBIN STATION CT 802 ST JOHNS, FL 32259 US

FEI Number: 92-0803596

Name and Address of Current Registered Agent:

SWANSON, RECIA A 1294 PONTE VEDRA BLVD PONTE VEDRA BEACH, FL 32082 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	: RECIA SWANSON			02/09/2024
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	CEO	Title	COO	
Name	SWANSON, TERRELL J	Name	SWANSON, RECIA ROSE A	
Address	1294 PONTE VEDRA BLVD	Address	1294 PONTE VEDRA BLVD	
City-State-Zip:	PONTE VEDRA BEACH FL 32082	City-State-Zip:	PONTE VEDRA BEACH FL 32	2082

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000367121

Entity Name: LE DREAM AESTHETICS LLC

Current Principal Place of Business:

185 DURBIN STATION CT 802

Feb 09, 2024 Secretary of State 8394898539CC

FILED

Certificate of Status Desired: No

02/09/2024