

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000399554

Entity Name: BTAESTHETICSLLC

Current Principal Place of Business:

2131 ORANGE DR
PORT ORANGE, FL 32128

Current Mailing Address:

2131 ORANGE DR
PORT ORANGE, FL 32128

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TEXTER, BAILEY A
2131 ORANGE DR
PORT ORANGE, FL 32128 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 AP
Name TEXTER, KIM D
Address 2480 GUAVA DR
City-State-Zip: PORT ORANGE FL 32128

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: KIM TEXTER

MANAGER

04/29/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date