

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000457092

**Entity Name:** ALE IMPACT MAKEUP LLC

**Current Principal Place of Business:**

1750 JAMES AVE  
APT 6D  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

1750 JAMES AVE  
APT 6D  
MIAMI BEACH, FL 33139 US

**FEI Number:** 88-4365136

**Certificate of Status Desired:** No

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

FOLEY FORENSIC ACCOUNTING LLC  
4100 CORPORATE SQUARE  
STE 100  
NAPLES, FL 34104 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            CONTRERAS LIZANO, MARIA A  
Address        1750 JAMES AVE  
                  APT 6D  
City-State-Zip: MIAMI BEACH FL 33139

*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:** MARIA A CONTRERAS LIZANO

AMBR

04/24/2024

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

\_\_\_\_\_  
Date