

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000521945

**Entity Name:** SUGARING & ESTHETICS BY ALEX LLC

**Current Principal Place of Business:**

1801 WELLS ROAD  
402  
JACKSONVILLE, FL 32073

**Current Mailing Address:**

8144 LUMBER WAY  
JACKSONVILLE, FL 32222

**FEI Number:** 92-2463423

**Certificate of Status Desired:** No

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

PEARSON, ALEXANDRIA M  
8144 LUMBER WAY  
JACKSONVILLE, FL 32222 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 MGR  
Name PEARSON, ALEXANDRIA  
Address 8144 LUMBER WAY  
City-State-Zip: JACKSONVILLE FL 32222

*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:** ALEXANDRIA PEARSON

04/30/2025

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

\_\_\_\_\_  
Date