

2026 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000499086

Entity Name: AVOUS MEDSPA, PROFESSIONAL LIMITED LIABILITY COMPANY

FILED
Feb 09, 2026
Secretary of State
9477243622CC

Current Principal Place of Business:

10501 6 MILE CYPRESS PARKWAY
SUITE 110
FORT MYERS, FL 33966

Current Mailing Address:

10501 6 MILE CYPRESS PARKWAY
SUITE 110
FORT MYERS, FL 33966 US

FEI Number: 93-4257613

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOSEPH, VIERGELA D
10501 6 MILE CYPRESS PARKWAY
SUITE 110
FORT MYERS, FL 33966 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 JOSEPH, VIERGELA D AMBR
Address 10501 6 MILE CYPRESS PARKWAY
 SUITE 110
City-State-Zip: FORT MYERS FL 33966

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: VIERGELA JOSEPH

AGENT

02/09/2026

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date