

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000517153

**Entity Name:** ALICE LE BEAUTY LLC

**Current Principal Place of Business:**

5991 SW 36TH CT  
#A  
DAVIE, FL 33314

**Current Mailing Address:**

5991 SW 36TH CT  
#A  
DAVIE, FL 33314 US

**FEI Number:** 93-4927936

**Certificate of Status Desired:** Yes

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

LE, THI H  
5991 SW 36TH CT  
DAVIE, FL 33314 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            CEO  
Name            LE, THI H  
Address        5991 SW 36TH CT  
                  #A  
City-State-Zip: DAVIE FL 33314

*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:** THI H LE

THI H LE

04/05/2024

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

\_\_\_\_\_ Date