

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000033323

Entity Name: YOUR BESTIE ADVANCED AESTHETICS, LLC

Current Principal Place of Business:

533 NORTH NOVA RD
ORMOND BEACH, FL 32174

Current Mailing Address:

3 PINE CREST LANE
PALM COAST, FL 32164 US

FEI Number: 99-0986442

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DELEON, TERESA
3 PINE CREST LANE
PALM COAST, FL 32164 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: TERESA DELEON

01/22/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title OWNER
Name DELEON, TERESA
Address 533 NORTH NOVA RD
City-State-Zip: ORMOND BEACH FL 32174

Title MGR
Name DELEON, XAVIER
Address 3 PINE CREST LANE
City-State-Zip: PALM COAST FL 32164

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: TERESA DELEON

OWNER

01/22/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date