

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000270046

Entity Name: KASHMERE LASH EXPERIENCE LLC

Current Principal Place of Business:

5761 SOUTH ORANGE BLOSSOM TRAIL
9
ORLANDO, FL 32839

Current Mailing Address:

5761 S ORANGE BLOSSOM TRAIL
SUITE 9
ORLANDO, FL 32805 US

FEI Number: 87-4557531

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CROSBY, TATIANA J
5761 S ORANGE BLOSSOM TRAIL
SUITE 9
ORLANDO, FL 32805 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: TATIANA CROSBY

05/01/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name CROSBY, TATIANA J
Address 5761 S ORANGE BLOSSOM TRAIL
SUITE 9
City-State-Zip: ORLANDO 32805

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: TATIANA CROSBY

MGR

05/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date