

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000331830

**Entity Name:** SALON LEGGETT LLC

**Current Principal Place of Business:**

7820 BAYMEADOWS RD E APT 1214  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

7820 BAYMEADOWS RD E APT 1214  
JACKSONVILLE, FL 32256

**FEI Number:** 87-1789483

**Certificate of Status Desired:** Yes

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

LEGGETT, LEWIS A JR  
7820 BAYMEADOWS RD E APT 1214  
JACKSONVILLE, FL 32256 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            LEGGETT, LEWIS A JR  
Address        7820 BAYMEADOWS RD E APT 1214  
City-State-Zip: JACKSONVILLE FL 32256

*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:** LEWIS ALLEN LEGGETT

AMBR

04/07/2022

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

\_\_\_\_\_ Date