

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000003620

Entity Name: 5 LEAF WELLNESS INC

Current Principal Place of Business:

143 S JOHN SIMS PKWY
VALPARAISO, FL 32580

Current Mailing Address:

143 S JOHN SIMS PKWY
VALPARAISO, FL 32580

FEI Number: 82-5073051

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CASTANEDA, DEANN
4510 MARSHBROOK WAY
DESTIN, FL 32541 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

Officer/Director Detail :

Title	P, T	Title	VP
Name	CASTANEDA, DEANN	Name	CASTANEDA, THADDAEUS
Address	4570 MARSHBROOK WAY	Address	4570 MARSHBROOK WAY
City-State-Zip:	DESTIN FL 32541	City-State-Zip:	DESTIN FL 32541

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DEANN CASTANEDA

PRESIDENT

07/22/2019

Electronic Signature of Signing Officer/Director Detail

Date