2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000079164

Entity Name: ME OF SWFL LLC

Current Principal Place of Business:

69 TIMBERLAND CIR S FORT MYERS. FL 33919

Current Mailing Address:

69 TIMBERLAND CIR S FORT MYERS. FL 33919 US

FEI Number: 13-4309471 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRESTON, JOHN C III 69 TIMBERLAND CIR S FORT MYERS, FL 33919 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: JOHN C PRESTON 03/18/2024

Electronic Signature of Registered Agent

Date

FILED Mar 18, 2024

Secretary of State

2673435155CC

Authorized Person(s) Detail:

Title MGRM Title **MGRM**

MASSAGE MEMORIES, LLC CAPTAIN MASSAGE, LLC Name Name 11054 WINE PALM RD Address 14380 RIVA DEL LAGO Address City-State-Zip: FORT MYERS FL 33966 City-State-Zip: FORT MYERS FL 33907

Title **MGRM**

THE JOHN C PRESTON III TRUST Name

Address 69 TIMBERLAND CIR S City-State-Zip: FORT MYERS FL 33919

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: JOHN C PRESTON **MANAGER** Electronic Signature of Signing Authorized Person(s) Detail

03/18/2024 Date