

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000035900

**Entity Name:** 02 BREATHE, LLC

**Current Principal Place of Business:**

792 W MONTROSE ST  
CLERMONT, FL 34711

**Current Mailing Address:**

12808 LAKEVIEW AVE  
CLERMONT, FL 34711 US

**FEI Number:** 90-0613749

**Certificate of Status Desired:** No

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

ALDRICH, TINA M.  
12808 LAKEVIEW AVE  
CLERMONT, FL 34711 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:** TINA ALDRICH

02/21/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            CEO, AMBR  
Name            ALDRICH, TINA MARIE  
Address        12808 LAKEVIEW AVE  
City-State-Zip: CLERMONT FL 34711

*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:** TINA ALDRICH

**OWNER**

02/21/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date