2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 29, 2025
Secretary of State
5163297762CC

DOCUMENT# L12000023004

Entity Name: CANOPE WELLNESS CARE, PLLC

Current Principal Place of Business:

3900 WOODLAKE BLVD.
SUITE 205
GREENACRES, FL 33463

Current Mailing Address:

4492 THORNWOOD CIRCLE
PALM BEACH GARDENS, FL 33418 US

FEI Number: 45-4553993

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KNAUS, GABRIELE P MD
3900 WOOD LAKE BLVD
STE 205
GREENACRES, FL 33463 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: GABRIELE KNAUS, MD 01/29/2025

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	DIRECTOR
Name	KNAUS, GABRIELE P DR.
Address	4492 THORNWOOD CIRCLE
City-State-Zip:	PALM BEACH GARDENS FL 33418

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: GABRIELE P. KNAUS MD 01/29/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date