

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000129123

Entity Name: BETTER LIVING CHIROPRACTIC, LLC

Current Principal Place of Business:

840 E. OAKLAND PARK BLVD.
SUITE 114
OAKLAND PARK, FL 33334

Current Mailing Address:

P.O. BOX 24348
OAKLAND PARK, FL 33307 US

FEI Number: 46-1175640

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JAMES, CRAIG
2624 NORTHEAST 32ND STREET
APT 103 UNIT D
FORT LAUDERDALE, FL 33306 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 MGRM
Name JAMES, CRAIG A DR.
Address 2624 NE 32ND STREET
APT 103 UNIT D
City-State-Zip: FORT LAUDERDALE FL 33306

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: CRAIG JAMES

OWNER

02/22/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date