

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000068115

**Entity Name:** EDEN WELLNESS CENTER, LLC

**Current Principal Place of Business:**

1307 BELMONT PLACE  
BOYNTON BEACH, FL 33436

**Current Mailing Address:**

1088 E. EMERALD LAKE DRIVE  
PENDLETON, IN 46064 US

**FEI Number:** 46-2775416

**Certificate of Status Desired:** No

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

VIEKE, KELLI  
1307 BELMONT PLACE  
BOYNTON BEACH, FL 33436 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 VIEKE, KELLI  
Address 1088 E. EMERALD LAKE DRIVE  
City-State-Zip: PENDLETON IN 46064

*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:** KELLI VIEKE

**MANAGING MEMBER**

**04/04/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date