

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000134881

Entity Name: TODD HUDSON HOLISTIC HEALTH & CHIROPRACTIC LLC

Current Principal Place of Business:

3540 OSPREY AVE
SARASOTA, FL 34239

Current Mailing Address:

3540 OSPREY AVE
SARASOTA, FL 34239 US

FEI Number: 46-3752091

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KUIKEN, LYNN
1251 S TAMiami TRAIL
SARASOTA, FL 34239 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 HUDSON, TODD
Address 3540 OSPREY AVE
City-State-Zip: SARASOTA FL 34239

Title MGRM
Name SARASON, MARK
Address 3540 OSPREY AVE
City-State-Zip: SARASOTA FL 34239

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: TODD HUDSON

MGRM

04/27/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date