

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000193260

Entity Name: BRANDON WELLNESS CENTER LLC

Current Principal Place of Business:

902 W. LUMSDEN ROAD
SUITE 104
BRANDON, FL 33511

Current Mailing Address:

13039 SUMMERFIELD SQUARE DR
RIVERVIEW, FL 33578 US

FEI Number: 47-2594296

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON, MATTHEW
6309 COTTONWOOD LN
APOLLO BEACH, FL 33572 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	MGR	Title	MGR
Name	WILSON, MATTHEW BEN	Name	WILSON, YOLAINY
Address	13039 SUMMERFIELD SQUARE DR	Address	6309 COTTONWOOD LN
City-State-Zip:	RIVERVIEW FL 33578	City-State-Zip:	APOLLO BEACH FL 33572

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: MATTHEW BEN WILSON

OWNER

02/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date