

2023 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L16000080222

Entity Name: GRIFFIN CHIROPRACTIC CARE LLC

Current Principal Place of Business:

2043 14TH AVE
VERO BEACH, FL 32960

Current Mailing Address:

2043 14TH AVE
VERO BEACH, FL 32960 US

FEI Number: 81-2272647

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRIFFIN, SHANNON A
2043 14TH AVE
VERO BEACH, FL 32960 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: SHANNON A GRIFFIN

06/19/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name GRIFFIN, SHANNON
Address 2043 14TH AVE
City-State-Zip: VERO BEACH FL 32960

Title AMBR
Name MODESITT, JACQUELINE
Address 5304 NEIL DRIVE
City-State-Zip: ST PETERSBURG FL 33714

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: SHANNON GRIFFIN

AMBR

06/19/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date