

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000087567

Entity Name: ACTIVE RECOVERY THERAPEUTIC MASSAGE LLC

Current Principal Place of Business:

117 FITZSIMONS ST
PORT CHARLOTTE, FL 33954

Current Mailing Address:

117 FITZSIMONS ST
PORT CHARLOTTE, FL 33954 US

FEI Number: 82-2204290

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRUZ, SELENE
117 FITZSIMONS ST
PORT CHARLOTTE, FL 33954 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: SELENE CRUZ

04/04/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRES
Name CRUZ, MICHAEL
Address 117 FITZSIMONS ST
City-State-Zip: PORT CHARLOTTE FL 33954

Title AMBR
Name CRUZ, SELENE
Address 117 FITZSIMONS ST
City-State-Zip: PORT CHARLOTTE FL 33954

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: MICHAEL CRUZ

PRESIDENT

04/04/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date