2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT					
	DOCUMENT# L16000107140				
	Entity Name: HORMONE HEALTH AND WELLNESS OF THE PALM BEACHES, LLC				
	Current Principal Place of Business:				
	2730 S DIXIE HWY #4				
	WEST PALM BEACH, FL 33405				

# **Current Mailing Address:**

1007 NORTH FLAGLER DRIVE WEST PALM BEACH, FL 33401 US

# FEI Number: 81-2847666

## Name and Address of Current Registered Agent:

MOSCA, MARYELLEN 1007 NORTH FLAGLER DRIVE WEST PALM BEACH, FL 33401 US Certificate of Status Desired: Yes

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

## Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	MONDELL, CURT	Name	MOSCA, MARYELLEN
Address	315 ELLAMAR RD	Address	1007 NORTH FLAGLER DRIVE
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401

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: MARYELLEN MOSCA

MGMR

03/19/2020

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Mar 19, 2020 Secretary of State 2798673092CC