

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000200053

**Entity Name:** MINT CHIROPRACTIC LLC

**Current Principal Place of Business:**

6245 N FEDERAL HWY  
SUITE 405  
FT. LAUDERDALE, FL 33308

**Current Mailing Address:**

6245 N FEDERAL HWY  
SUITE 405  
FT. LAUDERDALE, FL 33308 US

**FEI Number:** 82-3845994

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SUSSMAN, BINYAMIN A  
6245 N FEDERAL HWY  
SUITE 405  
FT. LAUDERDALE, FL 33308 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:** BINYAMIN SUSSMAN

06/09/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            CEO  
Name            SUSSMAN, BINYAMIN A  
Address        6245 N FEDERAL HWY  
                  SUITE 405  
City-State-Zip: FT. LAUDERDALE FL 33308

*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:** BINYAMIN SUSSMAN

CEO

06/09/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date