

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000075433

Entity Name: RUTHERFORD'S NATURAL WELLNESS CENTER, LLC

Current Principal Place of Business:

5106 FOREST GREEN DR W
LAKELAND, FL 33811

Current Mailing Address:

5106 FOREST GREEN DR W
LAKELAND, FL 33811 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RUTHERFORD, JAMES
5106 FOREST GREEN DR W
LAKELAND, FL 33811 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 PRES
Name RUTHERFORD, ROSE
Address 5106 FOREST GREEN DR W
City-State-Zip: LAKELAND FL 33811

Title V-PR
Name RUTHERFORD, JAMES
Address 5106 FOREST GREEN DR W
City-State-Zip: LAKELAND FL 33811

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: JAMES RUTHERFORD

V-PR

01/27/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date