

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000008826

Entity Name: STRAINS OF HEALING, LLC

Current Principal Place of Business:

2424 WEST TAMPA BAY BLVD
K-102
TAMPA, FL 33607

Current Mailing Address:

2424 WEST TAMPA BAY BLVD
K-102
TAMPA, FL 33607 US

FEI Number: 82-3968947

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GEORGETTI, CHRIS
2424 WEST TAMPA BAY BLVD. K-102
TAMPA, FL 33607 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 MGR
Name GEORGETTI, CHRIS
Address 2424 WEST TAMPA BAY BLVD K-102
City-State-Zip: TAMPA FL 33607

Title MGR
Name MASWADEH, REHAM
Address 2424 WEST TAMPA BAY BLVD K-102
City-State-Zip: TAMPA FL 33607

Title MGR
Name SANTORO, MICHAEL
Address 2424 WEST TAMPA BAY BLVD. K-102
City-State-Zip: TAMPA FL 33607

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: CHRIS GEORGETTI

FOUNDER AND CEO

04/14/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date