

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000068051

Entity Name: 3 IN ONE HEALTH LLC

Current Principal Place of Business:

290 CITRUS TOWER BLVD
SUITE 230
CLERMONT, FL 34711

Current Mailing Address:

290 CITRUS TOWER BLVD
SUITE 230
CLERMONT, FL 34711 US

FEI Number: 82-4926663

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STOWERS, TALISA V
290 CITRUS TOWER BLVD SUITE #230
CLERMONT, FL 34711 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: TALISA VIRE STOWERS

03/07/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name STOWERS, TALISA V
Address 290 CITRUS TOWER BLVD, STE 230
City-State-Zip: CLERMONT FL 34711

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: TALISA VIRE STOWERS

OWNER

03/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date