## 2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L18000149022

Entity Name: TRUTH HEALTH ACADEMY, LLC

FILED
May 07, 2024
Secretary of State
6185167806CC

Date

**Current Principal Place of Business:** 

7764 NW 44TH ST SUNRISE, FL 33351

**Current Mailing Address:** 

7764 NW 44TH ST SUNRISE, FL 33351 US

FEI Number: 83-1035693 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FEARON, SIR 7764 NW 44TH ST SUNRISE, FL 33351 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: SIR FEARON 05/07/2024

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title AUTHORIZED MEMBER

 Name
 MALCOLM, MARVA
 Name
 FEARON, SIR P

 Address
 7764 NW 44TH ST
 Address
 7764 NW 44TH ST

 City-State-Zip:
 SUNRISE FL 33351
 City-State-Zip:
 SUNRISE FL 33351

Title MGR Title MGR

NameFEARON, NIEKONameFEARON, BRITANYAddress7764 NW 44TH STAddress7764 NW 44TH STCity-State-Zip:SUNRISE FL 33351City-State-Zip:SUNRISE FL 33351

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: SIR P FEARON MGR 05/07/2024