

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000173629

Entity Name: SHAKTI WELLNESS JOINT, LLC

Current Principal Place of Business:

1150 POLK ST
HOLLYWOOD, FL 33019

Current Mailing Address:

1150 POLK ST
HOLLYWOOD, FL 33019 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FEINZIG, STEVEN D
1150 POLK ST
HOLLYWOOD, FL 33019 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 SECRETARY
Name FEINZIG , DARLENE
Address 1150 POLK ST
City-State-Zip: HOLLYWOOD FL 33019

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: DARLENE FEINZIG

PRESIDENT

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date