

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000177926

Entity Name: NEW AGE HEALTH AND WELLNESS LLC

Current Principal Place of Business:

12773 FOREST HILL BLVD
SUITE 1211
WELLINGTON, FL 33414

Current Mailing Address:

12773 FOREST HILL BLVD
SUITE 1211
WELLINGTON, FL 33414 US

FEI Number: 83-1393423

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HASLUP, JOHN D
12773 FOREST HILL BLVD
SUITE 1211
WELLINGTON, FL 33414 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 TORE, PATRICIA
Address 12773 FOREST HILL BLVD
SUITE 1211
City-State-Zip: WELLINGTON FL 33414

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: PATRICIA TORE

SECRETARY

02/01/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date