

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000203822

Entity Name: LUX LIFESTYLE CHIROPRACTIC LLC

Current Principal Place of Business:

31 ALMERIA AVE
CORAL GABLES, FL 33134

Current Mailing Address:

31 ALMERIA AVE
CORAL GABLES, FL 33134 US

FEI Number: 83-3436927

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOLLIDAY, BRITTANY N
31 ALMERIA AVE
CORAL GABLES, FL 33134 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: BRITTANY HOLLIDAY

03/25/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name HOLLIDAY, BRITTANY N
Address 3119 SW 27TH AVE
City-State-Zip: MIAMI FL 33133

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: BRITTANY HOLLIDAY

MGR

03/25/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date