

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000263056

Entity Name: STRONG HEALER LLC

Current Principal Place of Business:

5079 N DIXIE HWY
#199
OAKLAND PARK, FL 33334

Current Mailing Address:

5079 N DIXIE HWY
#199
OAKLAND PARK, FL 33334

FEI Number: 81-2655004

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STRONG, MELISSA A
5079 N DIXIE HWY
#199
OAKLAND PARK, FL 33334 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 MGR
Name STRONG, MELISSA A
Address 5079 N DIXIE HWY #199
City-State-Zip: OAKLAND PARK FL 33334

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: MELISSA ANN STRONG

OWNER, MANAGER

04/22/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date