

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000281067

**Entity Name:** SERENE ORCHID WELLNESS LLC

**Current Principal Place of Business:**

1008 W GARDEN STREET  
PENSACOLA, FL 32502

**Current Mailing Address:**

1008 W GARDEN STREET  
PENSACOLA, FL 32502 US

**FEI Number:** 83-2877681

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HENRY, TIA MARCHEA E  
1008 W GARDEN STREET  
PENSACOLA, FL 32502 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 HENRY, TIA MARCHEA E  
Address 1008 W GARDEN STREET  
City-State-Zip: PENSACOLA FL 32502

*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:** TIA MARCHEA E HENRY

**OWNER**

**09/14/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date