# 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000285489

Entity Name: ACHIEVE CHIROPRACTIC CARE, LLC

## **Current Principal Place of Business:**

3137 S. FLORIDA AVE. LAKELAND, FL 33803

## **Current Mailing Address:**

1921 DEL CREST PL LAKELAND, FL 33803 US

### FEI Number: 83-2799235

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

WELCH, KATHERINE J 1921 DEL CREST PL LAKELAND, FL 33803 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	E: KATHERINE J WELCH			04/06/2023
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	AR	Title	MANAGING MEMBER	
Name	GOLENO, TERRI A	Name	WELCH PEEPLES, KATHERINE	J
Address	1921 DEL CREST PL	Address	1921 DEL CREST PL	
City-State-Zip:	LAKELAND FL 33803	City-State-Zip:	LAKELAND FL 33803	

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: TERRI GOLENO

AR

04/06/2023 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 06, 2023 Secretary of State 3833196179CC

Certificate of Status Desired: No