

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000087729

Entity Name: MEDWELL HEALTH OF FLORIDA LLC**Current Principal Place of Business:**1200 WEST CHESTNUT ST.
BROCKTON, MA 02301**Current Mailing Address:**782 PLYMOUTH ST, BAY12
HOLBROOK, MA 02343 US**FEI Number:** 83-4302488**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WAXMAN, JONATHAN
4040C NORTH BEACH RD
ENGLEWOOD, FL 34223 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	TK INVESTMENTS
Address	782 PLYMOUTH ST
City-State-Zip:	HOLBROOK MA 02343

Title	MGR
Name	WAXMAN, JONATHAN
Address	1200 WEST CHESTNUT ST
City-State-Zip:	BROCKTON MA 02301

Title	MGR
Name	DURANTE, ROBERT
Address	1200 WEST CHESTNUT ST
City-State-Zip:	BROCKTON MA 02301

Title	MGR
Name	AUFIERO, JAMIE
Address	1200 WEST CHESTNUT ST
City-State-Zip:	BROCKTON MA 02301

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: JAMIE AUFIERO**MGR****01/26/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date