

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000101659

**Entity Name:** NATIVE HEALTH AND WELLNESS LLC

**Current Principal Place of Business:**

806 EAST WINDWARD WAY  
APT PH11  
LANTANA, FL 33462

**Current Mailing Address:**

806 EAST WINDWARD WAY  
APT PH11  
LANTANA, FL 33462 US

**FEI Number:** 83-4456844

**Certificate of Status Desired:** No

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

MARX, MICHAEL G  
806 EAST WINDWARD WAY  
APT PH11  
LANTANA, FL 33462 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            OWNER  
Name            MARX, MICHAEL GERALD  
Address        806 EAST WINDWARD WAY  
                  APT PH11  
City-State-Zip: LANTANA FL 33462

Title            MGR  
Name            WALLACH, JASON M  
Address        423 SE 13TH ST  
City-State-Zip: FORT LAUDERDALE FL 33316

*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:** MICHAEL GERALD MARX

**OWNER**

**04/21/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date