

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000162158

**Entity Name:** BE WELL AND HEALTHY LLC

**Current Principal Place of Business:**

1919 FABIEN CIRCLE  
MELBOURNE, FL 32940

**Current Mailing Address:**

1919 FABIEN CIRCLE  
MELBOURNE, FL 32940 US

**FEI Number:** 84-2278900

**Certificate of Status Desired:** No

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

BABB, RHONDA E  
1919 FABIEN CIRCLE  
MELBOURNE, FL 32940 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:** RHONDA BABB

02/27/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name DAVIS, SCOTTIE  
Address 930 CENTRAL AVENUE  
UNIT 612  
City-State-Zip: SAINT PETERSBURG FL 33705

Title MGR  
Name BABB, RHONDA E  
Address 1919 FABIEN CIRCLE  
City-State-Zip: MELBOURNE FL 32940

*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:** SCOTTIE DAVIS

MGR

02/27/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date