PALM CITY, FL 34990 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:	: JAN SMITH			10/08/2020
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MGR	
Name	SMITH, JAN	Name	SMITH, STEVEN	
Address	2843 SW BRIGHTON WAY	Address	2843 SW BRIGHTON WAY	

**Current Principal Place of Business:** 2843 SW BRIGHTON WAY PALM CITY, FL 34990

DOCUMENT# L19000244292

Entity Name: THE WELLNESS KAFE LLC

#### **Current Mailing Address:**

2843 SW BRIGHTON WAY PALM CITY, FL 34990 UN

## FEI Number: 84-3051926

## Name and Address of Current Registered Agent:

JAN, SMITH 2843 SW BRIGHTON WAY PALM C

City-State-Zip: PALM CITY FL 34990

# 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: JAN SMITH

MANAGER

City-State-Zip: PALM CITY FL 34990

10/08/2020 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Oct 08, 2020 Secretary of State 4992146578CR

Certificate of Status Desired: No

#### 2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT