2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 07, 2025
Secretary of State
5613287516CC

DOCUMENT# L20000206067

Entity Name: WARRIOR WELLNESS 102, LLC

Current Principal Place of Business:

1130 TOWNPARK AVE
SUITE 1116
LAKE MARY, FL 32746

Current Mailing Address:

1924 ALAQUA DR
LONGWOOD, FL 32779 US

FEI Number: 87-0935628

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JAX WELLNESS CORP
1924 ALAQUA DR
LONGWOOD, FL 32779 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	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	ROBINSON, MARY	Name	RUIZ, JEFF
Address	1924 ALAQUA DR	Address	1924 ALAQUA DR
City-State-Zip:	LONGWOOD FL 32779	City-State-Zip:	LONGWOOD FL 32779

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: MARY ROBINSON AUTHORIZED MEMBER 02/07/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date