## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000373714

Entity Name: GF4, LLC

**Current Principal Place of Business:** 

1722 N FEDERAL HWY HOLLYWOOD. FL 33020

**Current Mailing Address:** 

1722 N FEDERAL HWY HOLLYWOOD, FL 33020 US

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GAIA THERAPEATCOS LLC 1722 N FEDERAL HWY HOLLYWOOD, FL 33020 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

**FILED** Jan 21, 2022

**Secretary of State** 

9368201277CC

Authorized Person(s) Detail:

Title MGR Title

Name CALAMARI, ALBERT Name JOUAN, HERVE

1722 N FEDERAL HWY 1722 N FEDERAL HWY Address Address

City-State-Zip: HOLLYWOOD FL 33020 City-State-Zip: HOLLYWOOD FL 33020

Title **AMBR** 

GAIA THERAPEAT COS, LLC Name

Address 1722 N FEDERAL HWY City-State-Zip: HOLLYWOOD FL 33020

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: GAIA THERAPEAT ALBERT CALAMARI

**CEO** 

MGR

01/21/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date