

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000395940

**Entity Name:** MOI'S HEALTH & SAFETY CONSULTATION

**Current Principal Place of Business:**

968 GRANDHILL TOP DR  
APOPKA, FL 32703

**Current Mailing Address:**

968 GRANDHILL TOP DR  
APOPKA, FL 32703

**FEI Number:** 86-3984916

**Certificate of Status Desired:** No

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

GREEN, TAMOI  
968 GRANDHILL TOP  
APOPKA, FL 32703 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 MGR  
Name GREEN, TAMOI  
Address 968 GRANDHILL TOP DR  
City-State-Zip: APOPKA FL 32703

*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:** TAMOI GREEN

MGR

04/28/2023

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

\_\_\_\_\_ Date