## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000323214

Entity Name: IVI WELLNESS LLC

## **Current Principal Place of Business:**

1740 NW 2ND STREET APT. 215 DELRAY BEACH, FL 33444

**Current Mailing Address:** 

1740 NW 2ND STREET APT. 215

DELRAY BEACH, FL 33444 US

FEI Number: 82-1712171 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

TUNCAP BLAND, KRISTINA 1740 NW 2ND STREET APT. 215 DELRAY BEACH, FL 33444 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** Aug 03, 2022

**Secretary of State** 

4862137505CC

## Authorized Person(s) Detail:

Title **AMBR** Title **AMBR** 

Name TUNCAP BLAND, KRISTINA Name NOLEN, TIMOTHY

1740 NW 2ND STREET, APT. 215 Address 1740 NW 2ND STREET, APT. 215 Address DELRAY BEACH FL 33444 City-State-Zip: DELRAY BEACH FL 33444 City-State-Zip:

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.