

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000325850

**Entity Name:** POWERHEALTH, LLC

**Current Principal Place of Business:**

6152 NEW OSPREY POINT  
WEEKI WACHEE, FL 34607

**Current Mailing Address:**

6152 NEW OSPREY POINT  
WEEKI WACHEE, FL 34607 UN

**FEI Number:** 87-1728399

**Certificate of Status Desired:** Yes

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

MIJIC, KADIAN R  
6152 NEW OSPREY POINT  
WEEKI WACHEE, FL 34607 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:** KADIAN MIJIC

03/28/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name MIJIC, DRAGOMIR DO  
Address 6152 NEW OSPREY POINT  
City-State-Zip: WEEKI WACHEE FL 34607

Title MGR  
Name MIJIC, KADIAN R AGNP-C  
Address 6152 NEW OSPREY POINT  
City-State-Zip: WEEKI WACHEE FL 34607

*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:** KADIAN MIJIC

03/28/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date