

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000339271

Entity Name: INTEGRATIVE CHIROPRACTIC OF CFL LLC

Current Principal Place of Business:

2613 SIMPSON ROAD
KISSIMMEE, FL 34744

Current Mailing Address:

12337 CITRUSWOOD DR
ORLANDO, FL 32832 US

FEI Number: 87-1875875

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPIVEY, RACHEL
12337 CITRUSWOOD DRIVE
ORLANDO, FL 32832 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: RACHEL SPIVEY

01/22/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	PEREZ, ANDRES	Name	SPIVEY, RACHEL
Address	12337 CITRUSWOOD DR	Address	12337 CITRUSWOOD DR
City-State-Zip:	ORLANDO FL 32832	City-State-Zip:	ORLANDO FL 32832

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: RACHEL SPIVEY

VICE PRESIDENT

01/22/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date