# 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000345874

#### Entity Name: ASCENT NUTRITION LLC

# **Current Principal Place of Business:**

7901 4TH ST N STE 300 ST. PETERSBURG, FL 33702

# **Current Mailing Address:**

7901 4TH ST N STE 300 ST. PETERSBURG, FL 33702 US

## FEI Number: 87-1979427

# Name and Address of Current Registered Agent:

NORTHWEST REGISTERED AGENT LLC 7901 4TH ST N STE 300 ST. PETERSBURG, FL 33702 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

## Authorized Person(s) Detail :

Title	AUTHORIZED MEMBER
Name	SCHUTTLER, LANCE
Address	36 OCEANVIEW DR
City-State-Zip:	OCEAN RIDGE FL 33435-7315

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: LANCE SCHUTTLER

MEMBER

02/03/2023 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 03, 2023 Secretary of State 7198306498CC

Certificate of Status Desired: No

Date