

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Apr 29, 2022
Secretary of State
0603280806CC

Entity Name: ESSENCE FOR WELLNESS, LLC

Current Principal Place of Business:

1553 SAN IGNACIO AVENUE
SUITE B
CORAL GABLES, FL 33146

Current Mailing Address:

1553 SAN IGNACIO AVENUE
SUITE B
CORAL GABLES, FL 33146 US

FEI Number: 87-2685764

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAND, GREGORY S ESQ
ONE SOUTH SCHOOL AVENUE
SUITE 500
SARASOTA, FL 34237 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 COSTA, EDUARDO
Address 1553 SAN IGNACIO AVENUE
SUITE B
City-State-Zip: CORAL GABLES FL 33146

Title MGR
Name COSTA, LUZIA
Address 1553 SAN IGNACIO AVENUE
SUITE B
City-State-Zip: CORAL GABLES FL 33146

Title MGR
Name MARINHO, FAUSTO
Address 1553 SAN IGNACIO AVENUE
SUITE B
City-State-Zip: CORAL GABLES FL 33146

Title MGR
Name MARINHO, JUDITE
Address 1553 SAN IGNACIO AVENUE
SUITE B
City-State-Zip: CORAL GABLES FL 33146

Title MGR
Name KNIHS, MARCOS
Address 1553 SAN IGNACIO AVENUE
SUITE B
City-State-Zip: CORAL GABLES FL 33146

Title MGR
Name KNIHS, MAISA
Address 1553 SAN IGNACIO AVENUE
SUITE B
City-State-Zip: CORAL GABLES FL 33146

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: EDUARDO COSTA

MANAGER

04/29/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date