

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000418013

Entity Name: ACME WELLNESS LLC

Current Principal Place of Business:

1548 E FLOWLER AVE
TAMPA, FL 33612

Current Mailing Address:

1548 E FLOWLER AVE
TAMPA, FL 33612

FEI Number: 87-2819849

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NP ACCOUNTING SOLUTIONS
24132 DENALI CT
LUT, FL 33559 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 MGRM
Name PATEL, SIDDHARTH
Address 1548 E FOWLER AVE
City-State-Zip: TAMPA FL 33612

Title MGRM
Name PATEL, DIPAL
Address 1548 E FOWLER AVE
City-State-Zip: TAMPA FL 33612

Title MGRM
Name PATEL, PAVNI
Address 1548 E FOWLER AVE
City-State-Zip: TAMPA FL 33612

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: SIDDHARTH PATEL

PARTNER

02/04/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date