

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000465804

Entity Name: NOMIND WELLNESS, LLC

Current Principal Place of Business:

15300 SW 103RD PLACE
MIAMI, FL 33157

Current Mailing Address:

15300 SW 103RD PLACE
MIAMI, FL 33157

FEI Number: 88-4278300

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OBREGON, FRANK
15300 SW 103RD PLACE
MIAMI, FL 33157 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	AR	Title	MEMBER
Name	SANCHEZ-OBREGON, JESSICA M	Name	OBREGON, FRANK
Address	15300 SW 103RD PLACE	Address	15300 SW 103RD PLACE
City-State-Zip:	MIAMI FL 33157	City-State-Zip:	MIAMI FL 33157

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: FRANK OBREGON

OWNER

02/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date