

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000467466

**Entity Name:** EWWE WELLNESS LLC

**Current Principal Place of Business:**

1198 VENETIAN WAY  
SUITE 305  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

1198 VENETIAN WAY  
SUITE 305  
MIAMI BEACH, FL 33139 UN

**FEI Number:** 87-3339148

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WILBURNE, LAUREN A  
1198 VENETIAN WAY  
SUITE 305  
MIAMI BEACH, FL 33139 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 TERMENTZI, ELENI  
Address ELIAS 14  
City-State-Zip: VEROIA, IMATHIA GR 59100

Title MGR  
Name WILBURNE, LAUREN  
Address 1198 VENETIAN WAY  
SUITE 305  
City-State-Zip: MIAMI BEACH FL 33139

*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:** LAUREN WILBURNE

MGR

03/28/2022

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date