

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000034576

**Entity Name:** GRAVITATE CHIROPRACTIC AND AESTHETIC WELLNESS CLINIC LLC

**FILED  
Apr 08, 2023  
Secretary of State  
026077761CC**

**Current Principal Place of Business:**

30 SW 1ST ST  
2005  
MIAMI, FL 33130

**Current Mailing Address:**

30 SW 1ST ST  
2005  
MIAMI, FL 33130 US

**FEI Number: 87-4796569**

**Certificate of Status Desired: No**

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

DE HEUSCH, MELODY  
30 SW 1ST ST  
2005  
MIAMI, FL 33130 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	Title	MGR
Name	DE HEUSCH, MELODY	Name	SOTO VEGA, GISSELA N
Address	30 SW 1ST ST 2005	Address	30 SW 1ST ST 2005
City-State-Zip:	MIAMI FL 33130	City-State-Zip:	MIAMI FL 33130

*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: MELODY DE HEUSCH**

**MGR**

**04/08/2023**

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

\_\_\_\_\_  
Date