

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000038163

Entity Name: HEAL HER HOLISTIC THERAPY, LLC

Current Principal Place of Business:

2430 SAGEMONT DRIVE
BRANDON, FL 33511

Current Mailing Address:

2430 SAGEMONT DRIVE
BRANDON, FL 33511 US

FEI Number: 88-0731922

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EBANKS, JANNEDRA M
2430 SAGEMONT DRIVE
BRANDON, FL 33511 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 EBANKS, JANNEDRA M
Address 2430 SAGEMONT DRIVE
City-State-Zip: BRANDON FL 33511

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: JANNEDRA EBANKS

MGR

04/30/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date