

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000109064

Entity Name: MY WEIGHT LOSS, LLC

Current Principal Place of Business:

8763 RIVER CROSSING BLVD
NEW PORT RICHEY, FL 34655

Current Mailing Address:

497 MARINER BLVD
SPRING HILL, FL 34609 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BATISTA, SUSAN
497 MARINER BLVD
SPRING HILL, FL 34609 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 BATISTA, SUSAN
Address 497 MARINER BLVD
City-State-Zip: SPRING HILL FL 34609

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: BATISTA, SUSAN

OWNER

01/30/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date