

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000138071

**Entity Name:** ROOTS WELLNESS AND MEDSPA LLC

**Current Principal Place of Business:**

1120 EAST KENNEDY BOULEVARD  
125  
TAMPA, FL 33602

**Current Mailing Address:**

1120 EAST KENNEDY BOULEVARD  
125  
TAMPA, FL 33602 US

**FEI Number:** 88-1587965

**Certificate of Status Desired:** Yes

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

LACERDA, MARCIO  
1050 WATER STREET  
1405  
TAMPA, FL 33602 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	LACERDA, MARCIO	Name	MCCORMICK, CAITLIN
Address	1050 WATER STREET 1405	Address	1050 WATER STREET 1405
City-State-Zip:	TAMPA FL 33602	City-State-Zip:	TAMPA FL 33602

*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:** MARCIO LACERDA

**MANAGER**

**01/10/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date