

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000011503

**Entity Name:** SCHIERMYER RENEWED WELLNESS LLC

**Current Principal Place of Business:**

1906 12 CT  
VERO BEACH, FL 32960

**Current Mailing Address:**

1906 12 CT  
VERO BEACH, FL 32960 US

**FEI Number:** 92-1679536

**Certificate of Status Desired:** No

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

SCHIERMYER RENEWED WELLNESS, LLC  
1906 12 CT  
VERO BEACH, FL 32960 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:** MATTHEW SCHIERMYER

02/11/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name SCHIERMYER, MATTHEW J  
Address 5220 21ST ST  
City-State-Zip: VERO BEACH FL 32966

*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:** MATTHEW SCHIERMYER

OWNER

02/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date