

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000059701

**Entity Name:** WOMB BLISS LLC

**Current Principal Place of Business:**

11577 N CAROLINA DR  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

11577 N CAROLINA DR  
BONITA SPRINGS, FL 34135 US

**FEI Number:** 92-3194279

**Certificate of Status Desired:** No

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

SCHURZ, JAY D  
11577 N CAROLINA DR  
BONITA SPRINGS, FL 34135 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 AMBR  
Name KATZENDER, NICOLE K  
Address 11577 N CAROLINA DR  
City-State-Zip: BONITA SPRINGS FL 34135

*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:** NICOLE K KATZENDER

MGR

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date