

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000169751

Entity Name: HEALING HANDS LLC

Current Principal Place of Business:

111 E MONUMENT AVE
SUITE 608
KISSIMMEE, FL 34741

Current Mailing Address:

111 E MONUMENT AVE
SUITE 608
KISSIMMEE, FL 34741 US

FEI Number: 92-3161852

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POCHETTE, VANESSA
1675 NESTLEWOOD TRL
ORLANDO, FL 32837 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 POCHETTE, VANESSA
Address 1675 NESTLEWOOD TRL
City-State-Zip: ORLANDO FL 32837

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: VANESSA POCHETTE

03/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date