

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000317441

Entity Name: DOSE OF HEAVEN LLC

Current Principal Place of Business:

19801 VILLAGE CENTER DRIVE
#1107
FORT MYERS, FL 33913

Current Mailing Address:

19801 VILLAGE CENTER DRIVE
#1107
FORT MYERS, FL 33913 US

FEI Number: 93-2249551

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FUSE, CLAUDIA E
19801 VILLAGE CENTER DRIVE
#1107
FORT MYERS, FL 33913 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 CEO
Name FUSE, CLAUDIA
Address 19801 VILLAGE CENTER DRIVE
 #1107
City-State-Zip: FORT MYERS FL 33913

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: CLAUDIA FUSE

02/27/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date