

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000393556

Entity Name: INFINITE WISDOM CHIROPRACTIC AND REIKI, LLC

Current Principal Place of Business:

2748 S FERN CREEK AVE
ORLANDO, FL 32806

Current Mailing Address:

2748 S FERN CREEK AVE
ORLANDO, FL 32806 US

FEI Number: 93-3050560

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

INC AUTHORITY RA
390 NORTH ORANGE AVE., STE 2300-N
ORLANDO, FL 32801 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 JONES, JUSTIN
Address 100 WEST GRAND STREET
4067
City-State-Zip: ORLANDO FL 32806

Title MGR
Name HERMIDA, ALISSA
Address 100 WEST GRAND STREET
4067
City-State-Zip: ORLANDO FL 32806

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: JUSTIN JONES

MANAGER

01/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date