Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000418546 3)))



H230004185463ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : COMPUTERSHARE

Account Number: 110432003053

Phone

: (561)694-8107

Fax Number

: (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			

LLC REGISTERED AGENT CHANGE WELLNESS WITH NADEGE LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

DEC 14 2023

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	ame of the limited liability company: Wellness with Na	dege LLC			
2. (a)	1025 E Hallandale Beach Bivd Ste 15 - 947	(}	n)		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Hallandale Beach .Florida (US)33009	_			
	10/27/2022 12:00:00 AM	_	1.220004630	58	
3.	Date of filing/registration in Florida	_ 4.		Document number	
5. (a)	LEGALING CORPORATE SERVICES INC.				
	Registered Agent and Registered Office shown on the records of 476 Riverside Ave.	- v:			
	Registered Office Address (MUST BE FLORIDA STREET)				
				12123	
	Jacksonville , FL	32202		M28 DEC	
/L)	Corporate Creations Network Inc.	·		PSS -8 5	
(0)	Enter name of NEW Registered Agent and/or NEW Registered	P. P.			
	801 US Highway 1		PR DEC -8 PM 3: 20 SELVAHASSEE FLORID		
	NEW Registered Office Address:	-			
	North Palm Beach	33408	<u>, .</u>		
change agent w was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liagree authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	vs of the registere ability co of the lim limited l	State of Floed office and mpany, it is ited liability is ability com	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.	
Signat	ure of a member or authorized representative of a member	Dani ——	Danielle W. Gossman, Special Manager Printed or typed name of signee		
I herel provision the obli to mere	by accept the appointment as registered agent and aground on some of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have the property of this change.		in this capa ince of my d hapter 605, infirm that ti	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been	
Cianne	W F /	Gossm	an, Special	Secretary	
əigilatül	re of Registered Agent				