L24000001394

(Requestor's Name)					
(Address)					
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(risaress)					
(C	ity/State/Zip/Phon	ne #)			
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PICK-UP	WAIT	MAIL			
(B	usiness Entity Na	me)			
(D	ocument Number)			
Certified Copies	Certificate	s of Status			
Consideration of Filips Officer					
Opecial matructions to	or lilling Officer.				
PICK-UP	usiness Entity Na ocument Number Certificate	me)			

Office Use Only



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DEPARTMENT OF STATE
OF CORPORATION
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A. PARISHANI FEB - 4 2024

COVER LETTER

	ation Section in of Corporations				
G SUBJECT:	lobal Wellness Transformation	n USA LLC			
SOBJET	· · · · · · · · · · · · · · · · · · ·	Name of Limited L	iability Company		
Dear Sir or Mad	dam:				
The enclosed R	egistered Agent/Registered	Office Change and	fee(s) are submitted for filing		
Please return all correspondence concerning this matter to the follows:		following:	2024 JAN 1 O		
Skyi Hubbard				10	
	Name of Person			E POR S	Ö
New Business F	iling LLC			AM 9:54 OFSTAIL RPORATION E.FLORIDA	· m
	Firm/Company	- · · · · · · · · · · · · · · · · · · ·			
8170 Washingto	n Village Dr				
	Address				
Dayton Ohio 45	458				
<u> </u>	City/State and Zip Coo	de			
skyi@newbusin	essfiling.org				
E-mail ad	dress: (to be used for future	annual report noti	tication)		
For further info	ormation concerning this ma	tter, please call:			
Clive Digby-Jon	nes	561 at (351-9134		
	Name of Person	<u> </u>	Area Code & Daytime Tele	phone Number	
Regist Divisio P.O. B	ration Section on of Corporations fox 6327 assee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahasse 2415 N. Monroe Street, Tallahassee, FL 32303	ee	
Enclos	ed is a check for the follow	ving amount:			
\$25	Filing Fee	<u> </u>	555 Filing Fee & Certified Cop	у	

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.

I. Na	ame of the limited liability company: Global Wellness	Transformat	ion USA L	I.C
2. (a)		(h)		
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		N	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	6032 Royal Birkdale Drive	d	6032 Royal	l Birkdale Drive
	Lake Worth Beach Florida 33463		ake Worth	h Beach Florida 33463
	12/22/2023	1.2	2400000139	94
3.	Date of filing/registration in Florida	_ _{4.} _]	Document number
5. (a)				
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida D	ept. of State:	Singaport
	Registered Agents Inc			ZOZ4 JAN 10 JULI ANTER JIVISION OF C TALLAHASS
	Registered Office Address (MUST BE FLORIDA STREET	'ADDRESS)		
	7901 4th St N Ste 300			N 10 N 10 N 10 N 10 N 10 N 10 N 10 N 10
	St Petersburg, Fi	LL		SEEL FLOOR
(b)				9: 54 OBIO/ OBIO/
(0)	Enter name of NEW Registered Agent and/or NEW Registered	d Office addr	<u>ess</u> :	
	Zenbusiness Inc			
	NEW Registered Office Address:			-
	336 E College AveSuite 301			
	Tallahassee . Fi	32301		
change agent was/w the art	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	aws of the So e registered iability com of the limite c limited lial	office and pany, it is ed liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
Signa	iture of a member or authorized representative of a member			Printed or typed name of signee
I here provis the ob- to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ly reflect a change in the registered office address, I din writing of this change.	ree to act in e performan ed for in Cha hereby conj	this capa ce of my d apter 605, firm that th	icity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been
	And to-			