

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000006715

**Entity Name:** ALUNA WELLNESS, INC

**Current Principal Place of Business:**

2219 GULF DRIVE N  
BRADENTON BEACH, FL 34217

**Current Mailing Address:**

2219 GULF DRIVE N  
BRADENTON BEACH, FL 34217 US

**FEI Number:** 36-4725329

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

UNITED STATES CORPORATION AGENTS, INC.  
476 RIVERSIDE AVE.  
JACKSONVILLE, FL 32202 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

**Officer/Director Detail :**

Title P,T  
Name GRAZIANO, PATRICIA  
Address 2219 GULF DRIVE  
City-State-Zip: BRADENTON BEACH FL 34217

Title D,S  
Name GRAZIANO, PATRICIA  
Address 2219 GULF DRIVE  
City-State-Zip: BRADENTON BEACH FL 34217

Title DIRECTOR, MANAGER  
Name LYNDON, MATTHEW A  
Address 2219 GULF DRIVE N  
City-State-Zip: BRADENTON BEACH FL 34217

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PATRICIA GRAZIANO

**PRESIDENT**

**03/18/2025**

Electronic Signature of Signing Officer/Director Detail

Date