

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000078658

**Entity Name:** BOTANICAL RESOURCE MEDSPA, LLC

**Current Principal Place of Business:**

805 SOUTH FORT HARRISON AVE.  
CLEARWATER, FL 33756

**Current Mailing Address:**

805 SOUTH FORT HARRISON AVE.  
CLEARWATER, FL 33756

**FEI Number:** 59-3567693

**Certificate of Status Desired:** No

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

KRITCH, KALE M  
2430 ESTANCIA BLVD.  
SUITE 205  
CLEARWATER, FL 33761 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:** KALE KRITCH

04/26/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name SEEFELD, PAMELA J  
Address 805 SOUTH FORT HARRISON AVE.  
City-State-Zip: CLEARWATER FL 33756

*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:** PAMELA SEEFELD

MGRM

04/26/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date