

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000006326

Entity Name: WELLNESS CENTER, "LIMITED LIABILITY COMPANY

Current Principal Place of Business:

3315 NE 16TH STREET
FORT LAUDERDALE, FL 33304

Current Mailing Address:

3315 NE 16TH STREET
FORT LAUDERDALE, FL 33304

FEI Number: 22-3974262

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOSKOW, HOWARD
3315 NE 16TH STREET
FORT LAUDERDALE, FL 33304 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 MOSKOW, HOWARD
Address 3315 NE 16TH STREET
City-State-Zip: FORT LAUDERDALE FL 33304

Title MGR
Name MOSKOW, ADAM
Address 3315 NE 16TH STREET
City-State-Zip: FORT LAUDERDALE FL 33304

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: HOWARD MOSKOW

MEMBER

03/17/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date