

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000090546

Entity Name: MACK CHIROPRACTIC, LLC

Current Principal Place of Business:

1813 SW 1ST AVENUE
OCALA, FL 34471

Current Mailing Address:

P.O. BOX 668
OCALA, FL 34478 US

FEI Number: 27-3389944

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAKAREWICZ, BEAU DR.
1813 SW 1ST AVENUE
OCALA, FL 34471 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: DR. BEAU MAKAREWICZ

03/16/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRESIDENT
Name MAKAREWICZ, BEAU R
Address P.O. BOX 668
City-State-Zip: Ocala FL 34478

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: BEAU R. MAKAREWICZ

PRESIDENT

03/16/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date