

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000094831

**Entity Name:** LOTUS WELLNESS CENTER, LLC

**Current Principal Place of Business:**

217 NW 15TH STREET  
MIAMI, FL 33136

**Current Mailing Address:**

3921 ALTON ROAD  
SUITE # 468  
MIAMI BEACH, FL 33140 US

**FEI Number:** 27-3438250

**Certificate of Status Desired:** No

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

COLLINS, CONSTANCE  
217 NW 15TH STREET  
MIAMI, FL 33136 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:** CONSTANCE COLLINS

02/05/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name THE SUNDARI FOUNDATION, INC.  
Address 217 NW 15TH STREET  
City-State-Zip: MIAMI FL 33136

*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:** ISABELLA DELL'OCA

EXECUTIVE DIRECTOR

02/05/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date