

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000087593

**Entity Name:** WELLNESS RX, LLC

**Current Principal Place of Business:**

7640 NW 25TH STREET  
SUITE 105  
MIAMI, FL 33122

**Current Mailing Address:**

7640 NW 25TH STREET  
SUITE 105  
MIAMI, FL 33122 US

**FEI Number:** 45-2952455

**Certificate of Status Desired:** No

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

DONADI, ANTONIO  
7640 NW 25TH STREET  
SUITE 105  
MIAMI, FL 33122 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:** ANTONIO, DONADI

02/01/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title P, S,MGR  
Name DONADI, ANTONIO  
Address 7640 NW 25TH STREET  
SUITE 105  
City-State-Zip: MIAMI FL 33122

Title CFOD  
Name DONADI, ANTONIO  
Address 7640 NW 25TH STREET  
SUITE 105  
City-State-Zip: MIAMI FL 33122

Title D  
Name DONADI, LUZ E  
Address 7640 NW 25TH STREET  
SUITE 105  
City-State-Zip: MIAMI FL 33122

*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:** ANTONIO DONADI

CFO

02/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date