

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000013423

Entity Name: DADELAND CHIROPRACTIC CENTER, LLC

Current Principal Place of Business:

8955 SW 87TH CT
SUITE 101
MIAMI, FL 33176

Current Mailing Address:

8955 SW 87TH CT
SUITE 101
MIAMI, FL 33176

FEI Number: 45-4383892

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEVITT, BARRY W
8955 SW 87TH CT
SUITE 101
MIAMI, FL 33176 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 MGRM
Name LEVITT, BARRY WDC
Address 8955 SW 87TH CT, SUITE 101
City-State-Zip: MIAMI FL 33176

Title MGRM
Name DAES, ERICK ADC
Address 8955 SW 87TH CT, SUITE 101
City-State-Zip: MIAMI FL 33176

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: BARRY W LEVITT

MANAGING MEMBER

01/07/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date