

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000014065

Entity Name: FLORIDA NATURAL MEDICINE LLC

Current Principal Place of Business:

11767 SOUTH DIXIE HWY
SUITE 408
PINECREST, FL 33156

Current Mailing Address:

11767 SOUTH DIXIE HWY
SUITE 408
PINECREST, FL 33156 US

FEI Number: 46-5099935

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CHILD, MARYANN
11767 SOUTH DIXIE HWY
SUITE 408
PINECREST, FL 33156 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: MARYANN CHILD

01/13/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name CHILD, MARYANN
Address 11767 SOUTH DIXIE HWY
SUITE 408
City-State-Zip: PINECREST FL 33156

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: MARYANN CHILD

MANAGER

01/13/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date