## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000054745

**Entity Name: ZENERGY CHIROPRACTIC LLC** 

**Current Principal Place of Business:** 

3305 RICE STREET MIAMI, FL 33133

**Current Mailing Address:** 

3305 RICE ST

MIAMI, FL 33133 US

FEI Number: 46-2683459 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

RUDY, GEOFFREY W DR. 3305 RICE STREET COCONUT GROVE, FL 33133 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: GEOFFREY RUDY 02/08/2019

Electronic Signature of Registered Agent

Date

FILED Feb 08, 2019

**Secretary of State** 

6211522314CC

Authorized Person(s) Detail:

Title CEO

Name RUDY, GEOFFREY W DR.
Address 3305 RICE STREET

City-State-Zip: COCONUT GROVE FL 33133

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: DR. GEOFFREY RUDY

OWNER

02/08/2019

Date