

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000153752

Entity Name: ADVANCED WELLNESS SOLUTIONS LLC

Current Principal Place of Business:

729 SW FEDERAL HWY
STE 102
STUART, FL 34994

Current Mailing Address:

729 SW FEDERAL HWY
STE 102
STUART, FL 34994 US

FEI Number: 37-1768800

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HURD, DANIELLE C DR.
729 SW FEDERAL HWY
STE 102
STUART, FL 34994 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 MGR
Name HURD, DANIELLE C DR.
Address 729 SW FEDERAL HWY
STE 102
City-State-Zip: STUART FL 34994

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: DANIELLE HURD, DC

OWNER

05/01/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date