

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000038079

Entity Name: JLO CLINIC, LLC

Current Principal Place of Business:

1509 SW 104 PL
MIAMI, FL 33174

Current Mailing Address:

1509 SW 104 PL
MIAMI, FL 33174 US

FEI Number: 47-3289609

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPEZ, JENNY
1509 SW 104 PL
MIAMI, FL 33174 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	P
Name	LOPEZ, JENNY
Address	1509 SW 104 PL
City-State-Zip:	MIAMI FL 33174

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: JENNY LOPEZ

P

01/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date