

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000154805

Entity Name: WELLNESS ON DEMAND, LLC

Current Principal Place of Business:

2485 TUSCAN OAKS LN
JACKSONVILLE, FL 32223

Current Mailing Address:

2485 TUSCAN OAKS LN
JACKSONVILLE, FL 32223 US

FEI Number: 47-5075018

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TROLLERUD, VERONICA
2485 TUSCAN OAKS LN
JACKSONVILLE, FL 32223 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 TROLLERUD, VERONICA
Address 2485 TUSCAN OAKS LN
City-State-Zip: JACKSONVILLE FL 32223

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: VERONICA TROLLERUD

MGR

03/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date