

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000053310

Entity Name: REDCROSS THERAPEUTIC MASSAGE, LLC.

Current Principal Place of Business:

703 EXECUTIVE DR.
WINTER PARK, FL 32789

Current Mailing Address:

703 EXECUTIVE DR.
WINTER PARK, FL 32789 US

FEI Number: 81-1661201

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REDCROSS, RASHAWN
1014 E SOUTH ST.
2
ORLANDO, FL 32801 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 REDCROSS, RASHAWN
Address 1014 E SOUTH ST.
2
City-State-Zip: ORLANDO FL 32801

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: RASHAWN REDCROSS

MGR

04/29/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date