

2024 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
1164 REDMAN ST.
B
ORLANDO, FL 32839 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 1164 REDMAN ST.
B
City-State-Zip: ORLANDO FL 32839

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 D REDCROSS

MGR

04/26/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date