

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000095145

**Entity Name:** NATURAL THERAPY & SPA, LLC.

**Current Principal Place of Business:**

7224 W COLONIAL DR  
ORLANDO, FL 32818

**Current Mailing Address:**

7575 PARK SPRINGS CR  
ORLANDO, FL 32835 US

**FEI Number: 81-2492014**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LEONARD, JONISE  
1902 SECRETARIAT CT  
GOTHA, FL 34734 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:** JONISE LEONARD

04/30/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name LEONARD, JONISE  
Address 7575 PARK SPRINGS CR  
City-State-Zip: ORLANDO FL 32835

*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:** JONISE LEONARD

MGR

04/30/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date