

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000081944

Entity Name: LIFESCAPE INTEGRATIVE THERAPY L.L.C.

Current Principal Place of Business:

6237 PRESIDENTIAL COURT
SUITE 110
FORT MYERS, FL 33919

Current Mailing Address:

3754 LAKE ST
FORT MYERS, FL 33901 US

FEI Number: 28-1277208

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GODFREY, CHARITY A
3754 LAKE ST
FORT MYERS,, FL 33901 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 GODFREY, CHARITY A
Address 3754 LAKE ST
City-State-Zip: FORT MYERS FL 33901

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: CHARITY GODFREY

MGR

03/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date