

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000097827

Entity Name: U-MOVE CHIROPRACTIC LLC

Current Principal Place of Business:

8201 DE HAVEN STREET
ORLANDO, FL 32832

Current Mailing Address:

8201 DE HAVEN STREET
ORLANDO, FL 32832 US

FEI Number: 82-1333145

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ESPINOSA, ANTHONY
8201 DE HAVEN STREET
ORLANDO, FL 32832 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 ESPINOSA, ANTHONY DR.
Address 8201 DE HAVEN STREET
City-State-Zip: ORLANDO FL 32832

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: ANTHONY ESPINOSA

MGR

03/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date