

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000123006

Entity Name: WALHEALTH LLC

Current Principal Place of Business:

17860 SE 109TH AVE SUITE 616A
616A
SUMMERFIELD, FL 34491

Current Mailing Address:

307 WOODS LANDING DR
LADY LAKE, FL 32159 US

FEI Number: 82-1900764

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NADA, IRENE
6950 DOLCE ST
ORLANDO, FL 32819 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 AUTHORIZED MEMBER

Name SHEHATA, PETER

Address 6950 DOLCE ST

City-State-Zip: ORLANDO FL 32819

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: SHEHATA PETER

OWNER

06/26/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date