2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 14, 2025
Secretary of State
0892505895CC

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Entity Name: ABSOLUTE WELLNESS, LLC

Current Principal Place of Business:

4503 ARBOR GATE DR.
BRADENTON, FL 34203

Current Mailing Address:

4503 ARBOR GATE DR.
BRADENTON, FL 34203 US

FEI Number: 20-5910526

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC.
2894 REMINGTON GREEN LANE
SUITE A
TALLAHASSEE, FL 32308 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: JACLYN WRIGHT, ASST SECRETARY 03/14/2025

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MEMBER, MANAGER	Title	MANAGER, MEMBER
Name	ELLIS, CURTIS	Name	ELLIS, BREANN
Address	4503 ARBOR GATE DR.	Address	4503 ARBOR GATE DR.
City-State-Zip:	BRADENTON FL 34203	City-State-Zip:	BRADENTON FL 34203

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: ELLIS , CURTIS MANAGER 03/14/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date