

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000106682

Entity Name: DENDERA NATURAL HEALTH LLC

Current Principal Place of Business:

6750 N. ANDREWS AVENUE,
SUITE 200
FORT LAUDERDALE, FL 33309

Current Mailing Address:

6750 N. ANDREWS AVENUE,
SUITE 200
FORT LAUDERDALE, FL 33309 US

FEI Number: 83-1696032

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC
7901 4TH STREET NORTH
SUITE 300
ST.PETERSBURG, FL 33702 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 AMBR
Name TOWER, MARTIN J
Address 1237 BAY RD, APT 15C
City-State-Zip: WEBSTER NY 14580

Title MGR
Name SIMONIAN-PALMERTON, BARBARA M
Address 5450 N. OCEAN BLVD
City-State-Zip: LAUDERDALE-BY-THE-SEA FL 33308

Title AMBR
Name TOWER, PATTI A
Address SKAMBHA, BOX 11
City-State-Zip: KODAIKANAL TN 62410-1

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: MARTIN J. TOWER

DIRECTOR

03/26/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date