## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000111670

Entity Name: NUTRA WELLNESS, LLC

**Current Principal Place of Business:** 

1170 NE CLEVELAND STREET CLEARWATER. FL 33755

**Current Mailing Address:** 

1170 NE CLEVELAND STREET CLEARWATER, FL 33755 US

FEI Number: 82-5527103 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIVELLINI, PETER A 911 CHESTNUT STREET CLEARWATER, FL 33756 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

FILED Feb 25, 2025

**Secretary of State** 

3809221447CC

Authorized Person(s) Detail:

Title MANAGER Title MANAGER

NameLATTANZI, DANIELENameJOHONNESSON, SUSANAddress1170 NE CLEVELAND STREETAddress1170 NE CLEVELAND STREET

City-State-Zip: CLEARWATER FL 33755 City-State-Zip: CLEARWATER FL 33755

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: SUSAN JOHONNESSON

**MANAGER** 

02/25/2025