

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000269722

Entity Name: CHIROPRACTIC HEALTH ASSOCIATES LLC

Current Principal Place of Business:

3741 CATHEDRAL OAKS PLACE NORTH
JACKSONVILLE, FL 32217

Current Mailing Address:

3741 CATHEDRAL OAKS PLACE NORTH
JACKSONVILLE, FL 32217 US

FEI Number: 30-1147504

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSI, CHRISTOPHER A DR
3741 CATHEDRAL OAKS PL.N
JACKSONVILLE, FL 32217 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: CHRISTOPHER ASSI

02/20/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title OWNER
Name ASSI, CHRISTOPHER DR
Address 3741 CATHEDRAL OAKS PL.N
City-State-Zip: JACKSONVILLE FL 32217

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: CHRISTOPHER ASSI

OWNER

02/20/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date