

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000280134

Entity Name: THE CHIROPRACTIC TRUHEALTHDR LLC

Current Principal Place of Business:

13450 PARKER COMMONS BLVD
#105
FORT MYERS, FL 33912

Current Mailing Address:

13450 PARKER COMMONS BLVD
#105
FORT MYERS, FL 33912 US

FEI Number: 83-2685958

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EVOLVE SWFL LLC
5237 SUMMERLIN COMMONS BLVD
SUITE 311
FORT MYERS, FL 33907 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: MIKE MECH

04/16/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name TOLISANO, JOSEPH M
Address 13450 PARKER COMMONS BLVD
#105
City-State-Zip: FORT MYERS FL 33912

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: TOLISANO , JOSEPH M

MGR

04/16/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date