

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000019383

Entity Name: TAURUS MEMORIAL WELLNESS SERVICES OF FLORIDA, LLC

Current Principal Place of Business:

1301 RIVERPLACE BLVD.
STE 800
JACKSONVILLE, FL 32207

Current Mailing Address:

11513 KINGS RIDGE CT S
JACKSONVILLE, FL 32218 US

FEI Number: 83-3139322

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARDNER, MINDI D
11513 KINGS RIDGE CT S
JACKSONVILLE, FL 32218 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/CEO	Title	MGR
Name	GARDNER, MINDI D	Name	WILLIAMS, EULYSSA L
Address	11513 KINGS RIDGE CT S	Address	11513 KINGS RIDGE CT S
City-State-Zip:	JACKSONVILLE FL 32218	City-State-Zip:	JACKSONVILLE FL 32218

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: MINDI GARDNER

CEO

04/30/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date