

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000034810

Entity Name: ISLE WELLNESS CENTER, LLC

Current Principal Place of Business:

1043 NW 40TH ST
MIAMI, FL 33127

Current Mailing Address:

1043 NW 40TH ST
MIAMI, FL 33127 US

FEI Number: 83-3564301

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LAZO, ALBERTO DAVID
1043 NW 40TH ST
MIAMI, FL 33127 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: ALBERTO LAZO

01/26/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	LAZO, ALBERTO	Name	RIVERA, ANGELA MARIA
Address	1043 NW 40TH ST	Address	1043 NW 40TH ST
City-State-Zip:	MIAMI FL 33127	City-State-Zip:	MIAMI FL 33127

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: ALBERTO D. LAZO

MGR

01/26/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date