

**2026 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000140491

**Entity Name:** HOLISTIC BALANCE LLC

**Current Principal Place of Business:**

3327 W CHESTNUT ST  
TAMPA, FL 33607

**Current Mailing Address:**

3327 W CHESTNUT ST  
TAMPA, FL 33607 US

**FEI Number:** 31-1824756

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MENDEZ, MONICA A MRS  
3327 W CHESTNUT ST  
TAMPA, FL 33607 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:** MONICA MENDEZ

04/10/2026

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name MENDEZ, MONICA A  
Address 3327 W CHESTNUT ST  
City-State-Zip: TAMPA FL 33607

*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:** MONICA A MENDEZ

MGR

04/10/2026

Electronic Signature of Signing Authorized Person(s) Detail

Date