

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000173012

**Entity Name:** ACCESS HOLISTIC HEALING LLC

**Current Principal Place of Business:**

840 111TH AVE N  
SUITE 8  
NAPLES, FL 34108

**Current Mailing Address:**

840 111TH AVE N  
SUITE 8  
NAPLES, FL 34108 US

**FEI Number:** 84-2528130

**Certificate of Status Desired:** No

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

DURHAM, MICHELE NICOLE  
840 111TH AVE N  
SUITE 8  
NAPLES, FL 34108 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:** MICHELE NICOLE DURHAM

04/14/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name DURHAM, MICHELE NICOLE  
Address 840 111TH AVE N  
SUITE 8  
City-State-Zip: NAPLES FL 34108

*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:** MICHELE DURHAM

OWNER/MGR

04/14/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date