2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 05, 2024
Secretary of State
9125323475CC

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Entity Name: SOL GONZALEZ CHIROPRACTIC, LLC

Current Principal Place of Business:

3023 STORYBROOK PRESERVE DRIVE
ODESSA, FL 33556

Current Mailing Address:

3023 STORYBROOK PRESERVE DRIVE
ODESSA, FL 33556 US

FEI Number: 84-2686067

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GONZALEZ RIVERA, SOLMARI
3023 STORYBROOK PRESERVE DRIVE
ODESSA, FL 33556 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	MANAGER
Name	GONZALEZ RIVERA , SOLMARI
Address	3023 STORYBROOK PRESERVE DRIVE
City-State-Zip:	ODESSA FL 33556

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: SOLMARIE GONZALEZ RIVERA OWNER 03/05/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date