

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000191177

Entity Name: AMETRINE HEALTH AND WELLNESS LLC

Current Principal Place of Business:

6193 NW 183RD STREET
UNIT #172625
HIALEAH, FL 33017

Current Mailing Address:

6193 NW 183RD STREET
UNIT #172625
HIALEAH, FL 33017

FEI Number: 84-2512053

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DOTSON, LATOYA
1141 NW 57 STREET
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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PMGR
Name DOTSON, LATOYA
Address 1141 NW 57 STREET
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: LATOYA DOTSON

SOLE PROPRIETOR

06/30/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date