2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2021
Secretary of State
7967083896CC

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Entity Name: THE PURE PLACE WELLNESS CENTER "LLC"

Current Principal Place of Business:

1201 NE 26TH ST
102
WILTON MANORS, FL 33305

Current Mailing Address:

1201 NE 26TH ST
102
WILTON MANORS, FL 33305 US

FEI Number: 84-2804681

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DESAUSSURE, ERONE C
729 W LAS OLAS BLVD
1
FORT LAUDERDALE, FL 33312 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	COO
Name	DESAUSSURE, ERONE C
Address	351 NW 17TH PLACE
City-State-Zip:	FORT LAUDERDALE FL 33311

Title	MEDICAL DIRECTOR
Name	JULIAN , MCQUIRTERS MD
Address	1201 NE 26TH ST 102
City-State-Zip:	WILTON MANORS FL 33305

Title	CEO
Name	DORSEY- DESAUSSURE, MAYA NIKOLE
Address	1721 NE 26TH 638
City-State-Zip:	FORT LAUDERDALE FL 33316

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: ERONE DESAUSSURE COO 04/27/2021

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