### **2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L19000209051

Entity Name: AMRON VITALITY AND WELLNES CENTER, LLC

**FILED** Sep 29, 2021 **Secretary of State** 5684932571CR

### **Current Principal Place of Business:**

8563 ARGYLE BUSINESS LOOP SUITE 3 JACKSONVILLE, FL 32244

# **Current Mailing Address:**

8563 ARGYLE BUSINESS LOOP SUITE 3 JACKSONVILLE, FL 32244 US

FEI Number: 84-3066327 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

FONTANEZ, BRUNILDA 8563 ARGYLE BUSINESS LOOP SUITE 3 JACKSONVILLE, FL 32244 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: BRUNILDA FONTANEZ 09/29/2021

> Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

Title MGR

Name CORDERO, DIANA

8507 HEATHER RUN DR N Address City-State-Zip: JACKSONVILLE FL 32256

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.

**MGR**