2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 06, 2024
Secretary of State
2475397779CC

DOCUMENT# L19000219636

Entity Name: OCEAN WELLNESS CENTER LLC

Current Principal Place of Business:

18441 NW 2ND AVE
SUITE 218
MIAMI GARDENS, FL 33169

Current Mailing Address:

18441 NW 2ND AVE
SUITE 218
MIAMI GARDENS, FL 33169 US

FEI Number: 84-3075350

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TAX MEDIC CORPORATE SERVICES LLC
18441 NW 2ND AVE
SUITE 218
MIAMI GARDENS, FL 33169 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: ALEXANDER MARTINEZ 03/06/2024

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	MARTINEZ, ALEXANDER	Name	TRUJILLO PEREZ, MIGUEL A
Address	18441 NW 2ND AVE SUITE 218	Address	18441 NW 2ND AVE SUITE 218
City-State-Zip:	MIAMI GARDENS FL 33169	City-State-Zip:	MIAMI GARDENS FL 33169

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: ALEXANDER MARTINEZ MANAGER 03/06/2024

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