

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000234476

**Entity Name:** MANGALA YOGA AND WELLNESS, LLC

**Current Principal Place of Business:**

8359 BEACON BLVD.  
STE 208  
FORT MYERS, FL 33907

**Current Mailing Address:**

8359 BEACON BLVD.  
SUITE 208  
FORT MYERS, FL 33907 US

**FEI Number:** 84-3172863

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MYER, ABBY E  
8359 BEACON BLVD.  
SUITE 208  
FORT MYERS, FL 33907 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 MGR  
Name MYER, ABBY E  
Address 8359 BEACON BLVD.  
SUITE 208  
City-State-Zip: FORT MYERS FL 33907

*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:** ABBY E. MYER

MGR

06/07/2020

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date