

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000288839

Entity Name: CHI REFLEXOLOGY LLC

Current Principal Place of Business:

3100 SW COLLEGE RD
418
OCALA, FL 34474

Current Mailing Address:

3100 SW COLLEGE RD
418
OCALA, FL 34474

FEI Number: 84-3909078

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LIU, FUZHI
3100 SW COLLEGE RD
418
OCALA, FL 34474 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 MMBR
Name LIU, FUZHI
Address 3100 SW COLLEGE RD
City-State-Zip: Ocala FL 34474

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: LIU FUZHI

MMBR

03/20/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date