

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000311813

Entity Name: INTEGRATED CHIROPRACTIC WELLNESS CENTER LLC

Current Principal Place of Business:

1449 YAMATO RD SUITE 2
BOCA RATON, FL 33431

Current Mailing Address:

1449 YAMATO RD SUITE 2
BOCA RATON, FL 33431

FEI Number: 85-3452024

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOLLENBERG, BRANDON
5500 N MILITARY TRAIL UNIT 146
BOCA RATON, FL 33496 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 AMBR
Name HOLLENBERG, BRANDON S
Address 1449 YAMATO RD SUITE 2
City-State-Zip: BOCA RATON FL 33431

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: HOLLENBERG, BRANDON S

OWNER

01/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date