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: JOSEPH OKSEMBERG

City-State-Zip: AVENTURA FL 33180

Electronic Signature of Signing Authorized Person(s) Detail

MGR

DOCUMENT# L20000327262

Entity Name: TOTAL WELLNESS OF AVENTURA LLC

Current Principal Place of Business:

20601 E DIXIE HIGHWAY 360 AVENTURA, FL 33180

Current Mailing Address:

20601 E DIXIE HIGHWAY 360 AVENTURA, FL 33180 US

FEI Number: 85-3670581

Name and Address of Current Registered Agent:

PALACIO, ANTHONY 12002 SW 128 CT 106 MIAMI, FL 33186 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

		Electronic olghatare of Registered Agent		
Authorized Person(s) Detail :				
	Title	AMBR	Title	AMBR
	Name	FRAYND, GERMAN	Name	FRAYND, ALAN
	Address	20601 E DIXIE HIGHWAY #360	Address	20601 E DIXIE HIGHWAY #360
	City-State-Zip:	AVENTURA FL 33180	City-State-Zip:	AVENTURA FL 33180
	Title	AMBR		
	Name	OKSEMBERG, JOSEPH		
	Address	20601 E DIXIE HIGHWAY #360		

Certificate of Status Desired: No

FILED Jan 30, 2023 Secretary of State 6545252561CC

> 01/30/2023 Date

Date