

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000343234

Entity Name: NEGRIN COMMUNITY WELLNESS CENTER LLC

Current Principal Place of Business:

686 EAST 4TH AVENUE
HIALEAH, FL 33010

Current Mailing Address:

540 E 46 ST
HIALEAH, FL 33013 US

FEI Number: 85-3826982

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RICARDO MIGUEL NEGRIN MARRERO
540 E 46 ST
HIALEAH, FL 33013 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 RICARDO MIGUEL NEGRIN MARRERO
Address 540 E 46 ST
City-State-Zip: HIALEAH FL 33013

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: RICARDO MIGUEL NEGRIN MARRERO

MANAGER

01/29/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date