

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000377970

Entity Name: HEALTH2OCONSULTING, LLC

Current Principal Place of Business:

506 CRESTOVER DRIVE
TEMPLE TERRACE, FL 34617

Current Mailing Address:

506 CRESTOVER DRIVE
TEMPLE TERRACE, FL 34617

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DRUMMOND WEHLE YONGE LLP
6987 EAST FOWLER AVENUE
TAMPA, FL 33617 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 REICH, ANDREW R
Address 506 CRESTOVER DRIVE
City-State-Zip: TEMPLE TERRACE FL 34617

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: ANDREW R REICH

MANAGER

04/29/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date