

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000114985

Entity Name: ACTIVATED CHIROPRACTIC & PERFORMANCE LLC

Current Principal Place of Business:

4951 ORANGE BLVD
PORT ORANGE, FL 32127

Current Mailing Address:

4951 ORANGE BLVD
PORT ORANGE, FL 32127 UN

FEI Number: 37-2001912

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALBERSWORTH, SETH J
4951 ORANGE BLVD
PORT ORANGE, FL 32127 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 CEO
Name ALBERSWORTH, SETH J
Address 4951 ORANGE BLVD
City-State-Zip: PORT ORANGE 32127

Title MGR
Name FRANCO, MEANA L
Address 4951 ORANGE BLVD
City-State-Zip: PORT ORANGE FL 32127

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: SETH JORDON ALBERSWORTH

CEO

04/28/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date