

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000333278

Entity Name: MUX BALANCED CARE, LLC

Current Principal Place of Business:

1809 LAUREL OAK DR
VALRICO, FL 33596

Current Mailing Address:

1809 LAUREL OAK DR
VALRICO, FL 33596 US

FEI Number: 87-1846589

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRITTANY BENNETT CPA PA
523 E LUMSDEN ROAD
BRANDON, FL 33511 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 JENKINS, CASSANDRA
Address 1809 LAUREL OAK DR
City-State-Zip: VALRICO FL 33596

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: CASSANDRA JENKINS

MGR

03/10/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date