

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000423208

**Entity Name:** CAFEVIDA WELLNESS LLC

**Current Principal Place of Business:**

18125 SW 139TH PATH  
MIAMI, FL 33177

**Current Mailing Address:**

18125 SW 139TH PATH  
MIAMI, FL 33177

**FEI Number: 87-2848946**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

GALBAN, CHRISTIAN  
18125 SW 139TH PATH  
MIAMI, FL 33177 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            GALBAN, CHRISTIAN  
Address        18125 SW 139TH PATH  
City-State-Zip: MIAMI FL 33177

*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: CHRISTIAN GALBAN**

**CEO**

**04/30/2022**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date