

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000439138

Entity Name: KI-BOE WELLNESS CENTER, LLC

Current Principal Place of Business:

3120 HOLIDAY STREET
DELTONA, FL 32738

Current Mailing Address:

3120 HOLIDAY STREET
DELTONA, FL 32738 US

FEI Number: 87-3011489

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BELL, LORI
3120 HOLIDAY STREET
DELTONA, FL 32738 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: LORI BELL

03/07/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	AR	Title	CFO
Name	BELL, MEACHIE J	Name	BELL, LORI JEAN
Address	1300 VICK RD, APT. 203	Address	3120 HOLIDAY STREET
City-State-Zip:	APOPKA FL 32712	City-State-Zip:	DELTONA FL 32738

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: LORI JEAN BELL

03/07/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date