

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000443386

**Entity Name:** VINUVO WELLNESS, LLC

**Current Principal Place of Business:**

166 NE 96TH ST.  
MIAMI, FL 33168

**Current Mailing Address:**

166 NE 96TH ST.  
MIAMI, FL 33168

**FEI Number: 87-3105944**

**Certificate of Status Desired:** No

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

RICHARD-PEAN, MIDLAINE  
166 NE 96TH ST.  
MIAMI, FL 33168 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            AMBR  
Name            RICHARD-PEAN, MIDLAINE  
Address        166 NE 96TH ST.  
City-State-Zip: MIAMI FL 33168

*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: MIDLAINE RICHARD-PEAN**

**AUTHORIZED MEMBER**

**01/19/2022**

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

\_\_\_\_\_  
Date