

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000505484

Entity Name: HEALING DEPARTMENT L.L.C

Current Principal Place of Business:

618 S. MARION AVE.,
102
LAKE CITY, FL 32025

Current Mailing Address:

PO BOX 953
FORT WHITE, FL 32038

FEI Number: 87-3734112

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AYALA, JOSE
618 S. MARION AVE.
102
LAKE CITY, FL 32025 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 AYALA, JOSE
Address 618 S. MARION AVE.
102
City-State-Zip: LAKE CITY FL 32025

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: JOSE L AYALA

MANAGING MEMBER

09/22/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date