

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000069609

Entity Name: WITIT HEALTH LLC

Current Principal Place of Business:

5322 SHALLEY CIRCLE WEST
FORT MYERS, FL 33919

Current Mailing Address:

5322 SHALLEY CIRCLE WEST
FORT MYERS, FL 33919 US

FEI Number: 88-0796828

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZENBUSINESS INC.
336 E. COLLEGE AVE.
SUITE 301
TALLAHASSEE, FL 32301 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 IBARRA MORENO, JUAN C
Address 5322 SHALLEY CIRCLE WEST
City-State-Zip: FORT MYERS FL 33919

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: JUAN C IBARRA MORENO

OWNER

03/31/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date