

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000091038

Entity Name: VILARDO CHIROPRACTIC, LLC

Current Principal Place of Business:

1166 MACK BAYOU ROAD
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

8276 BEECHMONT AVE
CINCINNATI, OH 45255 US

FEI Number: 87-4722679

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VILARDO, MASON
1166 MACK BAYOU ROAD
SANTA ROSA BEACH, FL 32459 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 VILARDO, MASON
Address 2715 OBSERVATORY AVE
City-State-Zip: CINCINNATI OH 45208

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: MASON VILARDO

DOCTOR

04/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date