

2026 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000160538

Entity Name: SOULTERRA HEALING LLC

Current Principal Place of Business:

116 DOGWOOD STREET
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

1824 ALBERTA LANE
WINDER, GA 30680 US

FEI Number: 86-2842033

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCLENDON, KAYLEE
116 DOGWOOD STREET
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 OWNER
Name MCCLENDON, KAYLEE
Address 1824 ALBERTA LANE
City-State-Zip: WINDER GA 30680

Title MANAGER
Name MCCLENDON, CAROL
Address 4432 PARK ROYAL DRIVE
City-State-Zip: FLOWERY BRANCH GA 30542

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: KAYLEE MCCLENDON

OWNER

03/08/2026

Electronic Signature of Signing Authorized Person(s) Detail

Date