

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000257836

Entity Name: ARETE MUSCLE THERAPY, LLC

Current Principal Place of Business:

8510 OLD COUNTY ROAD 54
NEW PORT RICHEY, FL 34655

Current Mailing Address:

2451 PALESTA DRIVE
TRINITY, FL 34655

FEI Number: 88-2854171

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RICHARDS, FELICIA
2451 PALESTA DR
TRINITY, FL 34655 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 RICHARDS, FELICIA
Address 2451 PALESTA DR
City-State-Zip: TRINITY FL 34655

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: FELICIA RICHARDS

OWNER

01/23/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date