

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000266818

Entity Name: WHOLISTIC LIVING ENTERPRISES, LLC

Current Principal Place of Business:

66 W FLAGLER STREET
FL 9 #6908
MIAMI, FL 33130

FILED
May 01, 2023
Secretary of State
5981167923CC

Current Mailing Address:

66 W FLAGLER STREET
FL 9 #6908
MIAMI, FL 33130 US

FEI Number: 88-2227113

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BENSOUSSAN, DAVID
66 W FLAGLER STREET
SUITE 900
MIAMI, FL 33130 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 LENNON, N
Address 66 W FLAGLER STREET
FL 9 #6908
City-State-Zip: MIAMI FL 33130

Title AMBR
Name WILLIAMS, A
Address 66 W FLAGLER STREET
FL 9 #6908
City-State-Zip: MIAMI FL 33130

Title AMBR
Name HAYES, A
Address 66 W FLAGLER STREET
FL 9 #6908
City-State-Zip: MIAMI FL 33130

Title AMBR
Name WILLIAMS, L
Address 66 W FLAGLER STREET
FL 9 #6908
City-State-Zip: MIAMI FL 33130

Title AMBR
Name AL-SHAIR, K
Address 66 W FLAGLER STREET
FL 9 #6908
City-State-Zip: MIAMI FL 33130

Title AMBR
Name BRAGG, T
Address 66 W FLAGLER STREET
FL 9 #6908
City-State-Zip: MIAMI FL 33130

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: NAADHIRAH LENNON

MANAGING MEMBER

05/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date