

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000307443

Entity Name: REMKA TOTAL CARE AND WELLNESS LLC

Current Principal Place of Business:

20505 E COUNTRY CLUB DRIVE
UNIT 138
AVENTURA, FL 33180

Current Mailing Address:

20505 E COUNTRY CLUB DRIVE
UNIT 138
AVENTURA, FL 33180 US

FEI Number: 88-3227591

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PIERRE, REMERCILE DR.
18181 NE 31ST COURT
PH 8
AVENTURA, FL 33160 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 AP
Name PIERRE, REMERCILE DR.
Address 18181 NE 31ST COURT , PH 8
City-State-Zip: AVENTURA FL 33160

Title AP
Name LOUIS JEAN, KATIA
Address 6879 BIG PINE KEY ST.
City-State-Zip: LAKE WORTH FL 33467

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: KATIA LOUISJEAN

AP

03/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date