

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000347504

**Entity Name:** SANCTUARY HOLISTIC WELLNESS, LLC

**Current Principal Place of Business:**

17844 TURNING LEAF CIRCLE  
LAND O LAKES, 34638

**Current Mailing Address:**

17844 TURNING LEAF CIRCLE  
LAND O LAKES, 34638 UN

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FRANCISCO, SHAWN  
17844 TURNING LEAF CIRCLE  
LAND O LAKES, FL 34638 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 CEO  
Name FRANCISCO, SHAWN  
Address 625 COMMISTON LANE  
City-State-Zip: LUTZ FL 33549

*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:** SHAWN FRANCISCO

CEO

04/30/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date