

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000438184

Entity Name: ZEN MEDICINE OKEECHOBEE, LLC

Current Principal Place of Business:

808 NORTH PARROTT AVE
OKEECHOBEE, FL 34972

Current Mailing Address:

808 NORTH PARROTT AVE
OKEECHOBEE, FL 34972 US

FEI Number: 92-0690454

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CATHERINE, OCONNOR
520 SE DIXIE HWY
STUART, FL 34994 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: CATHERINE OCONNOR

01/23/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title DIRECTOR
Name PEARSON, EDWARD DR
Address 8551 SE DRIFTWOOD ST
City-State-Zip: HOBE SOUND FL 33455

Title CEO, COO
Name O'CONNOR, CATHERINE
Address 5001 SW BIMINI CIR N
City-State-Zip: PALM CITY FL 34990

Title MGR
Name THOMPSON, CASEY
Address 16625 NW 203RD ST
City-State-Zip: OKEECHOBEE FL 34972

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: CATHERINE O'CONNOR

CEO,COO

01/23/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date