

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000507737

Entity Name: AMAZONIAWELLNESSERVICES, LLC

Current Principal Place of Business:

12001 NW 4TH ST.
PLANTATION, FL 33325

Current Mailing Address:

12001 NW 4TH ST.
PLANTATION, FL 33325 US

FEI Number: 92-1254435

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
476 RIVERSIDE AVE.
JACKSONVILLE, FL 32202 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 AMBR
Name SOTO, ALBERTO A
Address 12001 NW 4TH ST.
City-State-Zip: PLANTATION FL 33325

Title AMBR
Name SOTO, ROSANNA
Address 12001 NW 4TH ST.
City-State-Zip: PLANTATION FL 33325

Title AMBR
Name SOTO, TERESA E
Address 12001 NW 4TH ST.
City-State-Zip: PLANTATION FL 33325

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: ROSANNA SOTO

AMBR

02/11/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date