

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000001895

Entity Name: ALTERNATIVE WELLNESS SOLUTIONS LLC

Current Principal Place of Business:

7901 4TH ST N
SUITE 300
ST. PETERSBURG, FL 33702

Current Mailing Address:

7901 4TH ST N
SUITE 300
ST. PETERSBURG, FL 33702 US

FEI Number: 38-4327702

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC
7901 4TH ST N
SUITE 300
ST. PETERSBURG, FL 33702 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 VERNET, SOVET
Address 7901 4TH ST N STE 300
City-State-Zip: ST. PETERSBURG FL 33702

Title MGR
Name VERNET, GEORGE
Address 7901 4TH ST N STE 300
City-State-Zip: ST. PETERSBURG FL 33702

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: SOVET HOWARD-VERNET

OWNER/MEMBER

04/30/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date