2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000010855

Entity Name: BRAVO WELLNESS, LLC

Current Principal Place of Business:

20445 EMERALD PARKWAY DR.

SUITE 400

CLEVELAND, OH 44135

Current Mailing Address:

20445 EMERALD PARKWAY DR.

SUITE 400

CLEVELAND, OH 44135 US

FEI Number: 61-1739182 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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:

Name

Address

Electronic Signature of Registered Agent

Date

FILED Apr 15, 2024

Secretary of State

1794328534CC

Authorized Person(s) Detail:

Title **MANAGER** Title MANAGER

Name PSHOCK, JAMES Name HARRIS, JOHN

Address 20445 EMERALD PARKWAY DR. Address 20445 EMERALD PARKWAY DR.

SUITE 400 SUITE 400

CLEVELAND OH 44135 CLEVELAND OH 44135 City-State-Zip: City-State-Zip:

Title **MANAGER** CFO, AUTHORIZED Title

REPRESENTATIVE STOBO, JOHN

Name ABBUHL, DENNIS R JR. 20445 EMERALD PARKWAY DR.

20445 EMERALD PARKWAY DR. Address SUITE 400

SUITE 400 CLEVELAND OH 44135

City-State-Zip: CLEVELAND OH 44135 City-State-Zip:

Title MANAGER Title MANAGER

Name O'DONNELL, MICHAEL Name MOTTA, MICHAEL

20445 EMERALD PARKWAY DR. Address Address 20445 EMERALD PARKWAY DR. SUITE 400

SUITE 400 CLEVELAND OH 44135

City-State-Zip: City-State-Zip: CLEVELAND OH 44135

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: DENNIS R. ABBUHL JR.

AUTHORIZED REPRESENTATIVE 04/15/2024