

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M21000007100

Entity Name: REZOLUT WELLNESS, LLC

Current Principal Place of Business:

3550 LENOX RD. NE, STE. 1525
ATLANTA, GA 30326

Current Mailing Address:

3550 LENOX RD. NE, STE. 1525
ATLANTA, GA 30326 US

FEI Number: 87-0870959

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 KIM, JIN
Address 3550 LENOX RD. NE, STE. 1525
City-State-Zip: ATLANTA GA 30326

Title SECRETARY
Name DULOCK, KYLE J
Address 3550 LENOX RD. NE, STE. 1525
City-State-Zip: ATLANTA GA 30326

Title CFO
Name HERRON, CLAY
Address 3550 LENOX RD. NE, STE. 1525
City-State-Zip: ATLANTA GA 30326

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: KYLE DULOCK

MANAGER

04/14/2022

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date