

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000014439

**Entity Name:** SUMMIT WELLNESS OF JUPITER, L.L.C.

**Current Principal Place of Business:**

6650 W INDIANTOWN ROAD  
SUITE 200-57  
JUPITER, FL 33458

**Current Mailing Address:**

6650 W INDIANTOWN ROAD  
SUITE 200-57  
JUPITER, FL 33458 US

**FEI Number:** 86-1561905

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CANARELLI, VICTORIA L  
6650 W INDIANTOWN ROAD  
SUITE 200-57  
JUPITER, FL 33458 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 MGR  
Name CANARELLI, VICTORIA L  
Address 6650 W. INDIANTOWN ROAD SUITE  
200-57  
City-State-Zip: JUPITER FL 33478

*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:** VICTORIA L CANARELLI

MGR

03/22/2023

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date