

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M22000007467

**Entity Name:** RENEW HEALTH CONSULTING SERVICES, LLC.

**Current Principal Place of Business:**

107 W LEMON AVE  
MONROVIA, CA 91016

**Current Mailing Address:**

107 W LEMON AVE  
MONROVIA, CA 91016 US

**FEI Number: 47-4959740**

**Certificate of Status Desired: Yes**

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

SUNDOC FILINGS INCORPORATED  
3458 LAKESHORE DRIVE  
TALLAHASSEE, FL 32312 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 SHARMA, VATSALA  
Address 107 W LEMON AVE  
City-State-Zip: MONROVIA CA 91016

*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: VATSALA SHARMA**

**MANAGER**

**07/11/2023**

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

\_\_\_\_\_  
Date