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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN W MILLER

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P14000019806

Entity Name: SERENE TRANQUIL WELLNESS SERVICES INC

Current Principal Place of Business:

230 S. CYPRESS RD D POMPANO BEACH, FL 33060

Current Mailing Address:

230 S. CYPRESS RD SUITE D POMPANO BEACH, FL 33060 US

FEI Number: 46-4962002

Name and Address of Current Registered Agent:

MILLER, LILIANA I 4327 NW 3RD AVE POMPANO, FL 33064 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

Officer/Director Detail :

Title	Р	Title	VP
Name	MILLER, BRIAN W	Name	CARUSO, MARIE
Address	4327 NW 3 AVE	Address	4327 NW 3RD AVE
City-State-Zip:	POMPANO BEACH FL 33064	City-State-Zip:	POMPANO BEACH FL 33064
Title	S		
Name	MILLER, LILIANA I		
Address	4327 NW 3RD AVE		
City-State-Zip:	POMPANO BEACH FL 33064		

PRESIDENT

01/24/2016

Date

FILED Jan 24, 2016 Secretary of State CC4435614304

Certificate of Status Desired: No

Date