

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000105671

Entity Name: INSPIRING WELLNESS LLC

Current Principal Place of Business:

8830 SOUTH TAMIAMI TRAIL
SUITE #100
SARASOTA, FL 34238

Current Mailing Address:

8830 SOUTH TAMIAMI TRAIL
SUITE #100
SARASOTA, FL 34238 US

FEI Number: 27-3193797

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEPT. AGRICULTURE & CONSUMER SERVICES
407 SOUTH CALHOUN STREET
FINANCE & ACCOUNTING SECTION
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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGRM	Title	CEO, AUTHORIZED MEMBER
Name	HORLER, MARK D	Name	HORLER, KRISTEN
Address	8830 SOUTH TAMIAMI TRAIL SUITE #100	Address	8830 SOUTH TAMIAMI TRAIL SUITE #100
City-State-Zip:	SARASOTA FL 34238	City-State-Zip:	SARASOTA FL 34238

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: MARK D. HORLER

MGRM

01/09/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date