

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000034757

Entity Name: INSTITUTE FOR HORMONAL BALANCE, LLC

Current Principal Place of Business:

7009 DR. PHILLIPS BLVD.
150
ORLANDO, FL 32819

Current Mailing Address:

7009 DR. PHILLIPS BLVD.
150
ORLANDO, FL 32819

FEI Number: 26-2764835

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEE, EDWIN NMD
7009 DR. PHILLIPS BLVD.
150
ORLANDO, FL 32819 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
Name LEE, EDWIN NM.D.
Address 7009 DR. PHILLIPS BLVD STE. 150
City-State-Zip: ORLANDO FL 32819

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: EDWIN LEE

OWNER

02/10/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date