2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 12, 2016
Secretary of State
CC0800280547

DOCUMENT# L11000038776

Entity Name: THE HEALING CLINIC, LLC

Current Principal Place of Business:

184 BROOKS ST.
SUITE 2
FORT WALTON BEACH, FL 32548

Current Mailing Address:

233 SOTIR ST NW
FORT WALTON BEACH, FL 32548

FEI Number: 45-1103171

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32548 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	DIRECTOR
Name	MCQUAID, FELICIA	Name	MCQUAID, KEVIN M
Address	233 SOTIR ST. NW	Address	233 SOTIR ST. NW
City-State-Zip:	FORT WALTON BEACH FL 32548	City-State-Zip:	FORT WALTON BEACH FL 32548

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: FELICIA MCQUAID OWNER 03/12/2016

Electronic Signature of Signing Authorized Person(s) Detail — Date