

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000068813

Entity Name: EMERALD COAST MED SPA LLC

Current Principal Place of Business:

1807 ALHAMBRA ST
NAVARRE, FL 32566

Current Mailing Address:

1807 ALHAMBRA ST
NAVARRE, FL 32566 US

FEI Number: 45-2519023

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WILBANKS, STEPHANIE
1807 ALHAMBRA ST
NAVARRE, FL 32566 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 MGMR
Name WILBANKS, STEPHANIE
Address 1807 ALHAMBRA ST
City-State-Zip: NAVARRE FL 32566

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: STEPHANIE WILBANKS

OWNER

06/12/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date