

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000071718

Entity Name: MOTHERCARE LACTATION CONSULTING, LLC

Current Principal Place of Business:

1505 ROYAL CIRCLE
APOPKA,, FL 32703

Current Mailing Address:

1505 ROYAL CIRCLE
APOPKA,, FL 32703 US

FEI Number: 45-2598686

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WORISCHECK, KRISTIN L
1505 ROYAL CIRCLE
APOPKA,, FL 32703 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 MGR
Name WORISCHECK, KRISTIN L
Address 1505 ROYAL CIRCLE
City-State-Zip: APOPKA, FL 32703

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: KRISTIN L. WORISCHECK

MANAGER

01/22/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date