

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000063223

Entity Name: INFINITE HEALTH CENTERS, LLC

Current Principal Place of Business:

10650 WEST STATE ROAD 84
SUITE 104
DAVIE, FL 33324

Current Mailing Address:

10650 WEST STATE ROAD 84
SUITE 104
DAVIE, FL 33324

FEI Number: APPLIED FOR

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GOULD, RANDY B
10650 WEST STATE ROAD 84
SUITE 104
DAVIE, FL 33324 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 GOULD, RANDY B
Address 10650 WEST STATE ROAD 84 SUITE
104
City-State-Zip: DAVIE FL 33324

Title MGRM
Name SABBOTA, MARK G
Address 10650 WEST STATE ROAD 84 SUITE
104
City-State-Zip: DAVIE FL 33324

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: RANDY GOULD

MGRM

04/26/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date