

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000097904

Entity Name: SUNSET WELLNESS & REHAB CENTER, LLC

Current Principal Place of Business:

9425 SUNSET DRIVE
SUITE 130
MIAMI, FL 33173

Current Mailing Address:

9425 SUNSET DRIVE
SUITE 130
MIAMI, FL 33173 US

FEI Number: 46-3156979

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHMER, ANDREW
9425 SUNSET DRIVE
SUITE 130
MIAMI, FL 33173 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 SCHMER, ANDREW
Address 9425 SUNSET DRIVE
SUITE 130
City-State-Zip: MIAMI FL 33173

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: ANDREW SCHMER

MGR

01/17/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date