

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000144162

Entity Name: CUBA WELLNESS ADVENTURES LLC

Current Principal Place of Business:

51 PINE STREET
ATLANTIC BEACH, FL 32233

Current Mailing Address:

1365 NEILSON ST
BERKELEY, CA 94702 US

FEI Number: 46-3981805

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEGALINC CORPORATE SERVICES, INC.
5237 SUMMERLIN COMMONS
SUITE 400
FORT MYERS, FL 33907 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	MGRM
Name	RODRIGUEZ GIL, MOISES	Name	MARKS, SHOSHANNA
Address	1365 NEILSON ST	Address	1365 NEILSON ST
City-State-Zip:	BERKELEY CA 94702	City-State-Zip:	BERKELEY CA 94702

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: SHOSHANNA MARKS

DIRECTOR

02/08/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date