

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000168991

Entity Name: AVE MARIA WELLNESS SANCTUARY & SPA, LLC.

Current Principal Place of Business:

12015 SW 2ND STREET
PEMBROKE PINES, FL 33025

Current Mailing Address:

12015 SW 2ND STREET
PEMBROKE PINES, FL 33025

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANCHEZ, ROLANDO
12015 SW 2ND STREET
PEMBROKE PINES, FL 33025 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 SANCHEZ, ROLANDO
Address 12015 SW 2ND STREET
City-State-Zip: PEMBROKE PINES FL 33025

Title MGR
Name SANCHEZ, ROBERTO
Address 12015 SW 2ND STREET
City-State-Zip: PEMBROKE PINES FL 33025

Title MGR
Name SANCHEZ, ALEJANDRA M
Address 12015 SW 2ND STREET
City-State-Zip: PEMBROKE PINES FL 33025

Title MGR
Name ALEMAN, DABEIBA
Address 12015 SW 2ND STREET
City-State-Zip: PEMBROKE PINES FL 33025

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: ROLANDO SANCHEZ

MGR

04/12/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date