## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000037717

Entity Name: EXCLUSIVE WELLNESS CLUB LLC

#### **Current Principal Place of Business:**

842 PALMETTO POINTE CIR. CAPE CORAL, FL 33991

# **Current Mailing Address:**

842 PALMETTO POINTE CIR. CAPE CORAL. FL 33991 US

# FEI Number: 46-5048585

# Name and Address of Current Registered Agent:

MOLLOY, SCOTT A 842 PALMETTO POINTE CIR. CAPE CORAL, FL 33991 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: SCOTT MOLLOY

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

Title AMBR Name MOLLOY, SCOTT A Address 842 PALMETTO POINTE CIR. City-State-Zip: CAPE CORAL FL 33991

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: SCOTT MOLLOY

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 30, 2015 Secretary of State CC5460743459

Certificate of Status Desired: Yes

04/30/2015

04/30/2015 Date

Date