

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000122728

**Entity Name:** PHYSIOMIND X, LLC

**Current Principal Place of Business:**

7140 ABBOTT AVENUE, 2ND FLOOR  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

7140 ABBOTT AVENUE, 2ND FLOOR  
MIAMI BEACH, FL 33141 US

**FEI Number:** 47-1518265

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LOPEZ PADIAL LEVI, LLC  
2600 S DOUGLAS RD  
SUITE 805  
CORAL GABLES, FL 33134 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:** VALENTIN LOPEZ

05/01/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name XANTHAKIS, ILAN  
Address 100 BISCAYNE BLVD, SUITE 2303  
City-State-Zip: MIAMI FL 33132

*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:** XANTHAKIS, ILAN

MGR

05/01/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date