

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000147121

**Entity Name:** HEALING FOODS, LLC

**Current Principal Place of Business:**

801 S OLIVE AVENUE  
1117  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

801 S OLIVE AVENUE  
1117  
WEST PALM BEACH, FL 33401

**FEI Number:** 47-2647888

**Certificate of Status Desired:** No

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

RAPOPORT, ALEXANDER  
801 S OLIVE AVENUE  
1117  
WEST PALM BEACH, FL 33401 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 RAPOPORT, ALEXANDER  
Address 801 S OLIVE AVENUE STE 1117  
City-State-Zip: WEST PALM BEACH FL 33401

Title MGR  
Name RAPOPORT, YUL  
Address 801 S OLIVE AVENUE STE 1117  
City-State-Zip: WEST PALM BEACH FL 33401

*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:** ALEXANDER RAPOPORT

**MEMBER**

**01/12/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date