

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000184634

**Entity Name:** ATMA SHANTI RETREATS LLC

**Current Principal Place of Business:**

92 SW 3RD STREET  
2805  
MIAMI, FL 33131

**Current Mailing Address:**

92 SW 3RD STREET  
2805  
MIAMI, FL 33130 US

**FEI Number:** 47-2451543

**Certificate of Status Desired:** No

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

RUSSELL, ASHLEE A  
1610 DREXEL AVE  
APT 9  
MIAMI BEACH, FL 33139 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 AR  
Name RUSSELL, ASHLEE A  
Address 1610 DREXEL AVE APT 9  
City-State-Zip: MIAMI BEACH FL 33139

*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:** ASHLEE A RUSSELL

**REGISTERED AGENT**

**04/28/2015**

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

\_\_\_\_\_  
Date