

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000188814

**Entity Name:** SKANDHAS CENTER OF LEADERSHIP AND COACHING FOR CHANGE LLC

**FILED**  
**Apr 10, 2015**  
**Secretary of State**  
**CC6018198481**

**Current Principal Place of Business:**

1 N OCEAN BLVD  
ST# 1004  
POMPANO BEACH, FL 33062

**Current Mailing Address:**

1 N OCEAN BLVD  
ST# 1004  
POMPANO BEACH, FL 33062

**FEI Number: 47-2515379**

**Certificate of Status Desired: No**

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

INCORP SERVICES INC  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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 NOGUEROL, MIGUEL M  
Address 1 N OCEAN BLVD APT 1004  
City-State-Zip: POMPAN BEACH FL 33062

*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: MIGUEL MARTINEZ NOGUEROL**

**MANAGER**

**04/10/2015**

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

\_\_\_\_\_  
Date