

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000004268

**Entity Name:** IRON HORSE HEALING, LLC

**Current Principal Place of Business:**

14116 SIMMONS LAKE ROAD  
BROOKSVILLE, FL 34601

**Current Mailing Address:**

14116 SIMMONS LAKE ROAD  
BROOKSVILLE, FL 34601 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

LAYMON AND ASSOCIATES, INC.  
23110 SR 54, SUITE 129  
LUTZ, FL 33549 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 SMITH, LORI  
Address 14116 SIMMONS LAKE ROAD  
City-State-Zip: BROOKSVILLE FL 34601

*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:** LORI SMITH

CEO

04/30/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date