

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000133528

**Entity Name:** WHOLE LIFE RECOVERY, LLC

**Current Principal Place of Business:**

7777 GLADES ROAD  
100  
BOCA RATON, FL 33434

**Current Mailing Address:**

7777 GLADES ROAD  
100  
BOCA RATON, FL 33434

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

ACCOUNTABLE FINANCIAL SERVICES GROUP INC  
625 SE 10TH STREET  
SUITE 2  
DEERFIELD BEACH, FL 33441 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:** LAURYN CHARLES

05/01/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name KKMD, LLC  
Address 7777 GLADES ROAD, SUITE 100  
City-State-Zip: BOCA RATON FL 33434

Title MGR  
Name GEM-KAM, LLC  
Address 10783 AVENIDA SANTA ANA  
City-State-Zip: BOCA RATON FL 33498

*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:** BRIAN MANGINES

MEMBER

05/01/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date