### 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000155772

#### Entity Name: CADENCE THERAPEUTIC MASSAGE, LLC

## **Current Principal Place of Business:**

10515 CORAL KEY AVE TAMPA, FL 33647

## **Current Mailing Address:**

10515 CORAL KEY AVE TAMPA, FL 33647

## FEI Number: 47-5033659

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

BAST, PAMELA L 10515 CORAL KEY AVE TAMPA, FL 33647 US

## Certificate of Status Desired: No

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

## Authorized Person(s) Detail :

Title	MGR	Title	AR
Name	BAST, PAMELA L	Name	BAST, JOHN G
Address	10515 CORAL KEY AVE	Address	10515 CORAL KEY AVE
City-State-Zip:	TAMPA FL 33647	City-State-Zip:	TAMPA FL 33647

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: PAMELA BAST

OWNER/OPERATOR

04/26/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Apr 26, 2016 Secretary of State CC7154856421

Date