

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000173030

**Entity Name:** SLM PILATES, LLC

**Current Principal Place of Business:**

8824 VIA BELLA NOTTE  
ORLANDO, FL 32836

**Current Mailing Address:**

8824 VIA BELLA NOTTE  
ORLANDO, FL 32836

**FEI Number:** 47-5295106

**Certificate of Status Desired:** No

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

MILLHORN ELDER LAW PLANNING GROUP, LLC  
11294 US HIGHWAY 301  
OXFORD, FL 34484 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 MILLHORN, STACEY L  
Address 8824 VIA BELLA NOTTE  
City-State-Zip: ORLANDO FL 32836

*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:** STACEY L. MILLHORN

MGR

04/20/2016

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

\_\_\_\_\_  
Date