

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000173906

Entity Name: NUTRI-ELIXIR, LLC

Current Principal Place of Business:

9831 NW 24 STREET
SUNRISE, FL 33322

Current Mailing Address:

P.O. BOX 450956
FORT LAUDERDALE, FL 33345 US

FEI Number: 47-5377474

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRUJILLO, ALVARO
9831 NW 24 ST
SUNRISE, FL 33322 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 TRUJILLO, ALVARO
Address 9831 NW 24 ST
City-State-Zip: SUNRISE FL 33322

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: ALVARO TRUJILLO RUMIE

MGR

04/14/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date