# 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000134035

Entity Name: LIVING FREE THERAPY SERVICES LLC

# **Current Principal Place of Business:**

1270 N EGLIN PARKWAY C-12

SHALIMAR, FL 32579

# **Current Mailing Address:**

1270 N EGLIN PARKWAY C-12 SHALIMAR, FL 32579 US

FEI Number: 81-3259103 Certificate of Status Desired: No

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

NELSON, MELISSA 1270 N EGLIN PARKWAY C-12 SHALIMAR, FL 32579 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

**FILED** Jan 09, 2017

**Secretary of State** 

CC4608125907

### Authorized Person(s) Detail:

Title MGR

NELSON, MELISSA Name

1270 N EGLIN PARKWAY Address

C-12

City-State-Zip: SHALIMAR FL 32579

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.

01/09/2017 SIGNATURE: MELISSA NELSON **OWNER**