

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000227782

Entity Name: CAN IT NATURE'S MEDICINE, LLC

Current Principal Place of Business:

20533 BISCAYNE BLVD.
SUITE 469
AVENTURA, FL 33180

Current Mailing Address:

20533 BISCAYNE BLVD.
SUITE 469
AVENTURA, AL 33180 US

FEI Number: 82-3342374

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FELDENKRAIS LAW, P.A.
20533 BISCAYNE BLVD.
SUITE 469
AVENTURA, FL 33180 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 MMBR
Name FELDENKRAIS, MR. & MRS. MICHAEL
Address 20533 BISCAYNE BLVD SUITE 469
City-State-Zip: AVENTURA FL 33180

Title MMBR
Name STIENMETZ, MR. & MRS. MARK
Address 8143 EAST QUARTERHOUSE TRAIL
City-State-Zip: SCOTTSDALE AZ 85258

Title MMBR
Name BHARAT PATEL, LARRY
Address 910 DEVON CREEK RD.
City-State-Zip: WINTER SPRINGS FL 32706

Title MANAGER
Name SHAH, JAIMIN S
Address 910 DEVON CREEK RD.
City-State-Zip: WINTER SPRINGS FL 32708

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: MR. & MRS. MICHAEL FELDENKRAIS

MMBR

03/31/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date