

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000005435

Entity Name: HEALING HANDS OF LYMPHATICS PLUS L.L.C.

Current Principal Place of Business:

110 NORTH FEDERAL HWY
SUITE 201
HALLANDALE BEACH, FL 33009

Current Mailing Address:

110 NORTH FEDERAL HWY
SUITE 201
HALLANDALE BEACH, FL 33009 US

FEI Number: 65-0950562

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DAVEY, SUZANNE L OTR/L, CLT-LANA
110 N FEDERAL HWY
SUITE 201
HALLANDALE BEACH, FL 33009 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: SUZANNE DAVEY

03/25/2013

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name DAVEY, SUZANNE L
Address 110 N FEDERAL HWY SUITE 201
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR
Name GLASER, MARGARET
Address 110 NORTH FEDERAL HWY
SUITE 201
City-State-Zip: HALLANDALE BEACH FL 33009

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SUZANNE DAVEY

MGR

03/25/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date