

2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000002205

Entity Name: PROVISION LIVING, LLC

Current Principal Place of Business:

1630 DES PERES RD., STE. 310
ST. LOUIS, MO 63131

Current Mailing Address:

1630 DES PERES RD., STE. 310
ST. LOUIS, MO 63131

FEI Number: 06-1757664

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 PROVISION LIVING MANAGEMENT,
INC.
Address 1630 DES PERES RD., STE. 310
City-State-Zip: ST. LOUIS MO 63131

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: PROVISION LIVING MANAGEMENT, INC

MGR

01/25/2013

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date