# 2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# M1300000807

Entity Name: HEALTH SPHERE, LLC

# **Current Principal Place of Business:**

175 SW 7TH STREET 1507 MIAMI, FL 33131

# **Current Mailing Address:**

175 SW 7TH STREET 1507 MIAMI, FL 33131 US

# FEI Number: 77-0715702

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

SOLE CALAS, PERLA 15450 NEW BARN ROAD 302 MIAMI LAKES, FL 33014 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: PERLA SOLE CALAS

Electronic Signature of Registered Agent

# Authorized Person(s) Detail :

AUTHORIZED REPRESENTATIVE Title SOLE CALAS, PERLA Name 15450 NEW BARN ROAD Address 302 City-State-Zip: MIAMI LAKES FL 33014

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.

> AUTHORIZED REPRESENTATIVE

SIGNATURE: PERLA S	SOLE CALAS
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Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 10, 2014 Secretary of State CC6460227362

Certificate of Status Desired: No

04/10/2014

Date

04/10/2014

Date