## 2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1300006636

Entity Name: 100% CHIROPRACTIC TAMPA 1, LLC

### **Current Principal Place of Business:**

9906 W. LINEBAUGH AVENUE TAMPA, FL 33626

## **Current Mailing Address:**

9906 W. LINEBAUGH AVENUE TAMPA, FL 33626

# FEI Number: 46-2919985

### Name and Address of Current Registered Agent:

CRAWFORD, CHRISTOPHER D.C. 9906 W. LINEBAUGH AVENUE TAMPA, FL 33626 US

FILED Mar 20, 2014

Secretary of State

CC2025043162

Certificate of Status Desired: Yes

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	Title	MGR
Name	CRAWFORD, CHRISTOPHER D.C.	Name	HELFRICH, JASON D.C.
Address	9906 W. LINEBAUGH AVENUE	Address	110 SOUTH WEBER STREET, SUITE
City-State-Zip:	TAMPA FL 33626	City-State-Zip:	104 COLORADO SPRINGS CO 33626
Title	MGR		
Name	HELFRICH, VANESSA D.C.		
Address	110 SOUTH WEBER STREET, SUITE 104		
City-State-Zip:	COLORADO SPRINGS CO 33626		

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: JASON HELFRICH, D.C.

MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

Date