

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000010610

Entity Name: HOLISTICA, LLC.

FILED
Aug 23, 2009
Secretary of State

Current Principal Place of Business:

1207 GREENE SQUARE
CELEBRATION, FL 34747 US

New Principal Place of Business:

1755 E HALLANDALE BCH BLVD
602E
HALLANDALE BCH, FL 33009 US

Current Mailing Address:

1207 GREENE SQUARE
CELEBRATION, FL 34747 US

New Mailing Address:

1755 E HALLANDALE BCH BLVD
602E
HALLANDALE BCH, FL 33009 US

FEI Number: 20-4836808 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ROMAN, MELISSA
1207 GREENE SQUARE
CELEBRATION, FL 34747 US

Name and Address of New Registered Agent:

ROMAN, MELISSA
1755 E HALLANDALE BCH BLVD
602E
HALLANDALE BCH, 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: MELISSA ROMAN

08/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ROMAN, MELISSA
Address: 1207 GREEN SQUARE
City-St-Zip: CELEBRATION, FL 34747 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ROMAN, MELISSA
Address: 1755 E HALLANDALE BCH BLVD 602E
City-St-Zip: HALLANDALE BCH, FL 33009 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: MELISSA ROMAN

PRES

08/23/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date