

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000064790

FILED
Apr 29, 2009
Secretary of State

Entity Name: HOLISTIC HEALING WELLNESS, LLC

Current Principal Place of Business:

134 EAST HAMPTON WAY
JUPITER, FL 33458

New Principal Place of Business:

13901 U.S. HIGHWAY ONE
SUITE 2
JUNO BEACH, FL 33408

Current Mailing Address:

134 EAST HAMPTON WAY
JUPITER, FL 33458

New Mailing Address:

13901 U.S. HIGHWAY ONE
SUITE 2
JUNO BEACH, FL 33408

FEI Number: 83-0514545

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILMES, BARBARA ANN
134 EAST HAMPTON WAY
JUPITER, FL 33458 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WILMES, BARBARA ANN
Address: 134 EAST HAMPTON WAY
City-St-Zip: JUPITER, FL 33458

Title: MGRM () Delete
Name: MURPHY, JENA ANN
Address: 2817 VIA ROYALE
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BARBARA ANN WILMES, DSW

MGR

04/29/2009

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