

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000035825

FILED
Apr 07, 2012
Secretary of State

Entity Name: NO WORRIES NATURAL MEDICINE, LLC

Current Principal Place of Business:

3010 S. FISKE BLVD.
SUITE A
ROCKLEDGE, FL 32955

New Principal Place of Business:

IHB PROFESSIONAL PLAZA, 2020 N. HWY A1A,
SUITE 110
INDIAN HARBOUR BEACH, FL 32937

Current Mailing Address:

P.O. BOX 273
MELBOURNE, FL 32902

New Mailing Address:

FEI Number: 94-3480328

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOWIE, MARCELA
3010 S. FISKE BLVD.
SUITE A
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

BOWIE, MARCELA
IHB PROFESSIONAL PLAZA, 2020 N. HWY A1A,
SUITE 110
INDIAN HARBOUR BEACH, FL 32937 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: MARCELA BOWIE

04/07/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: BOWIE, MARCELA
Address: P.O. BOX 273
City-St-Zip: MELBOURNE, FL 32902

Title: MGR
Name: BOWIE, GARY
Address: P.O. BOX 273
City-St-Zip: MELBOURNE, FL 32902

I hereby 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: MARCELA BOWIE

MGR

04/07/2012

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