

2010 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L09000050673

FILED
Sep 21, 2010
Secretary of State

Entity Name: HOLISTIC PRIMARY CARE LLC

Current Principal Place of Business:

1536 MICHIGAN AVE
APT 3
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1536 MICHIGAN AVE
APT 3
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 27-0308332 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

EISENMAN, DONALD M
1536 MICHIGAN AVE
APT 3
MIAMI BEACH, FL 33139 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
Name: EISENMAN, DONALD M
Address: 1536 MICHIGAN AVE APT 3
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR
Name: WELLS, DOROTHY S
Address: 35C VENETIAN WAY APT 101
City-St-Zip: MIAMI BEACH, FL 33139

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: DOROTHY S WELLS

MGR

09/21/2010

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