

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000026644

FILED
Apr 29, 2011
Secretary of State

Entity Name: INTEGRATIVE HEALTH, PLLC

Current Principal Place of Business:

2658 MAGUIRE ROAD
OCOE, FL 34761 US

New Principal Place of Business:

8879 W COLONIAL DR #180
OCOE, FL 34761 US

Current Mailing Address:

511 PINEAPPLE COURT
ORLANDO, FL 32835 US

New Mailing Address:

8879 W COLONIAL DR #180
OCOE, FL 34761 US

FEI Number: 27-2085471

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOYER, ASHLEY S
511 PINEAPPLE COURT
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

BOYER, ASHLEY S
8879 W COLONIAL DR #180
OCOE, FL 34761 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: ASHLEY S BOYER

04/29/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: BOYER, ASHLEY S
Address: 8879 W COLONIAL DR #180
City-St-Zip: OCOE, FL 34761 US

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: ASHLEY S BOYER

MGRM

04/29/2011

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