

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000055446

FILED
Apr 09, 2011
Secretary of State

Entity Name: ABSOLUTE WELLNESS OF TALLAHASSEE, L.L.C.

Current Principal Place of Business:

1342 TIMBERLANE RD.
102-B
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

1342 TIMBERLANE RD.
102-B
TALLAHASSEE, FL 32312

New Mailing Address:

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

Name and Address of Current Registered Agent:

ANDESON, DONNA M MS
1342 TIMBERLANE RD.
102-B
TALLAHASSEE, FL 32312 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: ABSOLUTE WELLNESS OF TALLAHASSEE
Address: 1342 TIMBERLANE RD. 102-B
City-St-Zip: TALLAHASSEE, FL 32312

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: DONNA ANDERSON MGR 04/09/2011

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