

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000018857

FILED
Apr 06, 2012
Secretary of State

Entity Name: INTEGRATIVE WELLNESS CENTER LLC

Current Principal Place of Business:

15815 SW 89 AVE
PALMETTO BAY, FL 33157

New Principal Place of Business:

Current Mailing Address:

15815 SW 89 AVE
PALMETTO BAY, FL 33157

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PADILLA, CAROLINA
15815 SW 89 AVENUE
PALMETTO BAY, FL 33157 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: PADILLA, CAROLINA
Address: 15815 SW 89 AVE
City-St-Zip: PALMETTO BAY, FL 33157

Title: MGRM
Name: ORTA, MANUEL
Address: 15815 SW 89 AVE
City-St-Zip: PALMETTO BAY, FL 33157

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: CAROLINA PADILLA

MGR

04/06/2012

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