

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000020302

Entity Name: EMOTION MASTERY, LLC

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2270 HIGHWAY 87  
NAVARRE, FL 32566 US

**New Principal Place of Business:**

**Current Mailing Address:**

2270 HIGHWAY 87  
NAVARRE, FL 32566 US

**New Mailing Address:**

PO BOX 5897  
NAVARRE, FL 32566 US

FEI Number: 27-5245038

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VELEZ, ALLISON P  
2270 HIGHWAY 87  
NAVARRE, FL 32566 US

**Name and Address of New Registered Agent:**

VELEZ, ALLISON P  
2040 SEAGRAPE DRIVE  
NAVARRE, FL 32566 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: ALLISON VELEZ

04/13/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: VELEZ, ALLISON P  
Address: PO BOX 5897  
City-St-Zip: NAVARRE, FL 32566 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: ALLISON VELEZ

OWNE

04/13/2012

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