

2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L12000023679

FILED
Oct 21, 2014
Secretary of State

Entity Name: WELLNESS CENTER OF NMB, LLC

Current Principal Place of Business:

1899 NE 164TH STREET
NORTH MIAMI BEACH, FL 33162 US

New Principal Place of Business:

Current Mailing Address:

1899 NE 164TH STREET
NORTH MIAMI BEACH, FL 33162 US

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:

FAILER, RAYMOND V
1899 NE 164TH STREET
NORTH MIAMI BEACH, FL 33162 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: RAYMOND FAILER

Electronic Signature of Registered Agent

Date

AUTHORIZED PERSONS:

Title: MGR
Name: FAILER, RAYMOND V
Address: 1899 NE 164TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162 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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: RAYMOND FAILER

MGR

10/21/2014

Electronic Signature of Authorized Person

Date