

# L13000036264

Division of Corporations

Page 1 of 1

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

59918

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H13000056536 3)))



H130000565363ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

FILED  
13 MAR 11 AM 5:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FLORIDA LIMITED LIABILITY CO.  
LIVE WELL CHIROPRACTIC CENTERS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

RECEIVED

13 MAR 11 PM 4:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
MAR 12 2013

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLE ONE  
NAME

H130000056536.

The name of this Limited Liabilities Company shall be  
LIVE WELL CHIROPRACTIC CENTERS, LLC

ARTICLE TWO  
ADDRESS

The mailing address and street address of the principal office of  
the Limited Liability Company is:

11776 W SAMPLE RD SUITE 105  
Coral Springs, FL 33065

ARTICLE THREE

REGISTERED AGENT, Registered office and Registered Agent's  
Signature


The name and the Florida street address of the registered agent is:

Steven C. Klein  
11776 W. Sample Road  
Suite 105  
Coral Springs, Florida 33065

Having been named as registered agent to accept service of process  
for the above stated limited liability company at the place  
designated in this certificate, we hereby accept the appointment as  
registered agent and agree to act in this capacity. We further  
agree to comply with the provisions of all statutes relating to the  
proper and complete performance of our duties, and we are familiar  
with and accept the obligations of our position as registered agent  
as provided for in Chapter 608, F.S.

Registered Agent

Steven C Klein

By:  Steven C Klein

Prepared by Steven C. Klein, CPA  
11776 W. Sample Rd # 105 Coral Springs, FL 33065

FILED  
13 MAR 11 AM 5:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H130000056536.

ARTICLE FOUR  
MEMBERS

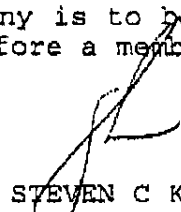
H13000056536

The members of this Limited Liability Company are:

1. DOUGLAS V BOWES

ARTICLE FIVE  
MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore a member-managed company.



STEVEN C KLEIN  
Authorized Representative of Member

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)



STEVEN C KLEIN  
Authorized Representative of Member

H13000056536