

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000102943

Entity Name: CENTER FOR ACUPUNCTURE & INTEGRATIVE MEDICINE, LLC

Current Principal Place of Business:

1345 36TH STREET
SUITE B
VERO BEACH, FL 32960

Current Mailing Address:

1345 36TH STREET
SUITE B
VERO BEACH, FL 32960

FEI Number: 20-5762476

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KING, ANGELA L AP
1125 DRIFTWOOD DR
VERO BEACH, FL 32963 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: ANGELA L KING, AP

03/28/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MRS
Name KING, ANGELA L AP
Address 1125 DRIFTWOOD DR
City-State-Zip: VERO BEACH FL 32963

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANGELA KING

OWNER

03/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date