2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2014
Secretary of State
CC1495823098

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Entity Name: SYNERGY WELLNESS CLINIC, LLC

Current Principal Place of Business:

138 NE 2ND AVE
300
MIAMI, FL 33132

Current Mailing Address:

138 NE 2ND AVE
300
MIAMI, FL 33132

FEI Number: 01-0878852

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARSHALL, GUSTAVO
138 NE 2ND AVE
300
MIAMI, FL 33132 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:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR
Name	MARSHALL, GUSTAVO DC
Address	138 NE 2ND AVE, #300
City-State-Zip:	MIAMI FL 33132

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: GUSTAVO MARSHALL MGR 04/24/2014

Electronic Signature of Signing Authorized Person(s) Detail — Date