

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000033516

Entity Name: MIDTOWN SPA, LLC

Current Principal Place of Business:

215 E. 7TH AVE
TALLAHASSEE, FL 32303

Current Mailing Address:

4647 OLD MAGNOLIA RD
TALLAHASSEE, FL 32309

FEI Number: 80-0384188

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DELEDDA, KIMBERLY R
4647 OLD MAGNOLIA RD
TALLAHASSEE, FL 32309 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 MGRM
Name DELEDDA, KIMBERLY R
Address 4647 OLD MAGNOLIA RD
City-State-Zip: TALLAHASSEE FL 32309

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: KIMBERLY R DELEDDA

MGMBR

02/10/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date