

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000104855

Entity Name: INSTITUTE OF WELLBEING LLC

Current Principal Place of Business:

2924 TUCKERSTOWN DRIVE
SARASOTA, FL 34231

Current Mailing Address:

2050 PROCTOR ROAD
SUITE F
SARASOTA, FL 34231 US

FEI Number: 27-1225473

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KNUTH, ROBIN
2050 PROCTOR ROAD
SUITE F
SARASOTA, FL 34231 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 JOHANNSMIEIER, BJOERN MGRM
Address 1819 MAIN STREET # 108
City-State-Zip: SARASOTA FL 34236

Title MGRM
Name JOHANNSMIEIER, HEIKE MGRM
Address MITTERWEG 4
City-State-Zip: RAUBLING, GERMANY BY 83064

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BJOERN JOHANNSMIEIER

MGRM

04/16/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date