

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000037835

Entity Name: OLDE SEVILLE CHIROPRACTIC PLLC

Current Principal Place of Business:

210 E. INTENDENCIA ST.
PENSACOLA, FL 32502

Current Mailing Address:

210 E. INTENDENCIA ST
PENSACOLA, FL 32502 US

FEI Number: 27-2298050

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JEUDEVINE, LINDSEY KDC
3461 GOLDENWOOD WAY
PENSACOLA, FL 32504 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 JEUDEVINE, LINDSEY KDC
Address 3461 GOLDENWOOD WAY
City-State-Zip: PENSACOLA FL 32504

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: LINDSEY K. JEUDEVINE, DC

PRESIDENT

04/28/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date