

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000074975

Entity Name: 8TH ELEMENT WELLNESS, LLC

Current Principal Place of Business:

90 BEAL PKWY.NW
SUITE A-1
FORT WALTON BEACH, FL 32548

Current Mailing Address:

90 BEAL PKWY.NW
SUITE A-1
FORT WALTON BEACH, FL 32548

FEI Number: 80-0625278

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCALLASTER, ALEXANDREA
90 BEAL PKWY.NW
SUITE A-1
FORT WALTON BEACH, FL 32548 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 PRESIDENT
Name MCALLASTER, ALEXANDREA
Address 90 BEAL PKWY., STE A-1
City-State-Zip: FORT WALTON BEACH FL 32548

Title VP
Name MORGAN, CHRISTIE
Address 90 BEAL PKWY.NW
 SUITE A-1
City-State-Zip: FORT WALTON BEACH FL 32548

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: ALEXANDREA MCALLASTER

PRESIDENT

04/03/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date