

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000087593

**Entity Name:** WELLNESS RX, LLC

**Current Principal Place of Business:**

7640 NW 25TH STREET  
SUITE 105  
MIAMI, FL 33122

**Current Mailing Address:**

7640 NW 25TH STREET  
SUITE 105  
MIAMI, FL 33122 US

**FEI Number:** 45-2952455

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DONADI, ANTONIO  
7640 NW 25TH STREET  
SUITE 105  
MIAMI, FL 33122 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:** ANTONIO, DONADI

01/24/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	P, S	Title	CFOD
Name	DONADI, ANTONIO	Name	DONADI, ANTONIO
Address	7640 NW 25TH STREET SUITE 105	Address	7640 NW 25TH STREET SUITE 105
City-State-Zip:	MIAMI FL 33122	City-State-Zip:	MIAMI FL 33122
Title	MGR		
Name	QUINTERO YAMIN, JESUS A		
Address	1300 BRICKELL BAY DRIVE, SUITE 500		
City-State-Zip:	MIAMI FL 33131		

*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:** ANTONIO DONADI

P

01/24/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date