

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000009649

**Entity Name:** ORLANDO HOLISTIC ACUPUNCTURE, LLC

**Current Principal Place of Business:**

2221 LEE RD  
SUITE 14  
WINTER PARK, FL 32789

**Current Mailing Address:**

2221 LEE RD  
SUITE 14  
WINTER PARK, FL 32789

**FEI Number:** 45-3088728

**Certificate of Status Desired:** No

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

PANCHAL, JIGNESH  
656 ROBIN LANE  
OVIEDO, FL 32765 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 MGR  
Name PANCHAL, JIGNESH  
Address 2221 LEE RD, SUITE 14  
City-State-Zip: WINTER PARK FL 32789

*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:** JIGNESH PANCHAL

MGR

04/13/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date