

**2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L13000054745

**Entity Name:** ZENERGY CHIROPRACTIC LLC

**Current Principal Place of Business:**

3305 RICE STREET  
MIAMI, FL 33133

**Current Mailing Address:**

3305 RICE ST  
MIAMI, FL 33133 US

**FEI Number:** 46-2683459

**Certificate of Status Desired:** Yes

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

RUDY, GEOFFREY W DR.  
3305 RICE STREET  
COCONUT GROVE , FL 33133 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:** GEOFFREY RUDY

10/02/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            CEO  
Name            RUDY, GEOFFREY W DR.  
Address        3305 RICE STREET  
City-State-Zip: COCONUT GROVE FL 33133

*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:** DR. GEOFFREY RUDY

CEO

10/02/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date