#### 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000081082

Entity Name: AUTHENTIC ORIENTAL HEALTHCARE, LLC

IIIe. AUTHENTIC ORIENTAL HEALTHOARE, L

# **Current Principal Place of Business:**

118 LAKE EMMA COVE DR. LAKE MARY, FL 32746

### **Current Mailing Address:**

118 LAKE EMMA COVE DR. LAKE MARY, FL 32746 US

FEI Number: 46-3171497 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CHEN, MENGLAN 118 LAKE EMMA COVE DR. LAKE MARY, FL 32746 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

FILED Mar 11, 2014

**Secretary of State** 

CC0817134860

### Authorized Person(s) Detail:

Title MGRM

Name CHEN, MENGLAN

Address 118 LAKE EMMA COVE DR.

City-State-Zip: LAKE MARY FL 32746

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: MENGLAN CHEN MGRM 03/11/2014