

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000131889

Entity Name: JEAN-ELIZABETH INSTITUTE OF AYURVEDA & AYURVEDA
HOLISTIC WELLNESS CENTER, "LLC"

FILED
Mar 29, 2016
Secretary of State
CC4784851629

Current Principal Place of Business:

2236 WINSLOW CIRCLE
CASSELBERRY, FL 32707

Current Mailing Address:

2236 WINSLOW CIRCLE
CASSELBERRY, FL 32707 US

FEI Number: 90-1008850

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HAMILTON REECE, JEAN-ELIZABETH F DR.
2236 WINSLOW CIRCLE
CASSELBERRY, FL 32707 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 DR.
Name HAMILTON REECE, JEAN-ELIZABETH
F DR.
Address 2236 WINSLOW CIRCLE
City-State-Zip: CASSELBERRY FL 32707

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: HAMILTON REECE JEAN-ELIZABETH F. DR.

OWNER

03/29/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date