

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000153752

Entity Name: ADVANCED WELLNESS SOLUTIONS LLC

Current Principal Place of Business:

1391 NW ST, LUCIE WEST BLVD
#376
PORT SAINT LUCIE, FL 34986

Current Mailing Address:

1391 NW ST, LUCIE WEST BLVD
#376
PORT SAINT LUCIE, FL 34986

FEI Number: 37-1768800

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HURD, DANIELLE C DR.
1401 TAMANGO DRIVE
WEST MELBOURNE, FL 32904 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 HURD, DANIELLE C DR.
Address 1401 TAMANGO DRIVE
City-State-Zip: WEST MELBOURNE FL 32904

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: DANIELLE HURD

DR.

02/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date