

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000181243

Entity Name: FLORIDA HERBAL REMEDIES LLC

Current Principal Place of Business:

5313 COLLINS AVE
512
MIAMI BEACH, FL 33140

Current Mailing Address:

13230 SW 20TH ST
MIAMI, FL 33175 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSSIE, PEDRO T
5313 COLLINS AVE
512
MIAMI BEACH, FL 33140 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 MGRM
Name ROSSIE, PEDRO T
Address 5313 COLLINS AVE
City-State-Zip: MIAMI BEACH FL 33140

Title MGRM
Name ROSSIE, MARLENE
Address 13230 SW 20TH ST
City-State-Zip: MIAMI FL 33175

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: PEDRO ROSSIE

MANAGING DIRECTOR

03/06/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date