## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000013346

**Entity Name: MASSAGE THERAPY LLC** 

**Current Principal Place of Business:** 

500 NE SPANISH RIVER BLVD, STE 35 BOCA RATON. FL 33431-4517

**Current Mailing Address:** 

2621 CRABAPPLE CIR BOYNTON BEACH, FL 33436

FEI Number: 47-2908226 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GARVIN, KEITH G 2621 CRABAPPLE CIR BOYNTON BEACH, FL 33436 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 02, 2016

**Secretary of State** 

CC3588855956

## Authorized Person(s) Detail:

Title MGR

Name GARVIN, KEITH G Address 2621 CRABAPPLE CIR

City-State-Zip: BOYNTON BEACH FL 33436

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.

**MGR** 

Electronic Signature of Signing Authorized Person(s) Detail