

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000086016

Entity Name: LIFES TREE DOCTOR LLC

Current Principal Place of Business:

3155 W BROWARD BLVD
FT LAUDERDALE, FL 33312

Current Mailing Address:

4511 NW 34TH ST
LAUDERDALE LAKES, FL 33319 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SEYMOUR, ANTHONY
3155 W BROWARD BLVD
FT LAUDERDALE, FL 33312 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	Title	MGR
Name	SEYMOUR, ANTHONY	Name	BOYD, CHAE
Address	3155 W BROWARD BLVD	Address	3155 W BROWARD BLVD
City-State-Zip:	FT LAUDERDALE FL 33312	City-State-Zip:	FT LAUDERDALE FL 33312

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: ANTHONY SEYMOUR

MANAGER

04/26/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date