

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000228959

Entity Name: MIRACLE MILE THERAPY, LLC

Current Principal Place of Business:

2780 N FLORIDA AVE, UNIT 1, HERNANDO PLAZA
HERNANDO, FL 34442

Current Mailing Address:

3053 E HEARTWOOD LN
HERNANDO, FL 34442 US

FEI Number: 81-4894218

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

YARCHUK, CHERYL A
3053 E HEARTWOOD LN
HERNANDO, FL 34442 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	AMBR	Title	AMBR
Name	YARCHUK, CHERYL ANN	Name	BELCHER, MICHAEL M
Address	2780 N FLORIDA AVE, UNIT 1, HERNANDO PLAZA	Address	2780 N FLORIDA AVE, UNIT 1, HERNANDO PLAZA
City-State-Zip:	HERNANDO FL 34442	City-State-Zip:	HERNANDO FL 34442

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: CHERYL ANN YARCHUK

AMBR

01/11/2017

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date