2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 25, 2018
Secretary of State
CC7430198515

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Entity Name: CORRECTIVE CHIROPRACTIC, PLLC

Current Principal Place of Business:

420 SOUTH STATE ROAD 7
SUITE 170
ROYAL PALM BEACH, FL 33414

Current Mailing Address:

420 SOUTH STATE ROAD 7
SUITE 170
ROYAL PALM BEACH, FL 33414 US

FEI Number: 82-4316612

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HASLETT, JOHN
420 SOUTH STATE ROAD 7
SUITE 170
ROYAL PALM BEACH, FL 33414 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	AP
Name	HASLETT, JOHN
Address	420 SOUTH STATE ROAD 7 SUITE 170
City-State-Zip:	ROYAL PALM BEACH FL 33414

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: JOHN HASLETT CHIROPRACTOR 06/25/2018

Electronic Signature of Signing Authorized Person(s) Detail — Date