

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000133604

Entity Name: HOLISTIX TREATMENT CENTERS LLC

Current Principal Place of Business:

1701 GREEN ROAD
C
DEERFIELD BEACH, FL 33064

Current Mailing Address:

1701 GREEN ROAD
C
DEERFIELD BEACH, FL 33064 US

FEI Number: 83-0812034

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AR HEALTHCARE HOLDINGS, LLC
4680 DOLPHIN DRIVE
LAKE WORTH, FL 33463 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
Name AR HEALTHCARE HOLDINGS, LLC
Address 4680 DOLPHIN DRIVE
City-State-Zip: LAKE WORTH FL 33463

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: AR HEALTHCARE HOLDINGS

MANAGER

03/28/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date