2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2014
Secretary of State
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Entity Name: SPIRIT OF WOMEN HEALTH NETWORK LLC

Current Principal Place of Business:

2424 NORTH FEDERAL HWY
SUITE 100
BOCA RATON, FL 33431

Current Mailing Address:

2424 NORTH FEDERAL HWY
SUITE 100
BOCA RATON, FL 33431

FEI Number: 20-2086634

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVIS, JOSEPH
6711 NORTH OCEAN BLVD UNIT 11
OCEAN RIDGE, FL 33435-3362 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
Name	DAVIS, JOSEPH
Address	2424 NORTH FEDERAL HWY STE 100
City-State-Zip:	BOCA RATON FL 33431

Title	AUTHORIZED REPRESENTATIVE
Name	DAVIS, JOSHUA
Address	2424 NORTH FEDERAL HWY SUITE 100
City-State-Zip:	BOCA RATON FL 33431

Title	AUTHORIZED REPRESENTATIVE
Name	DAVIS, JOSHUA
Address	2424 NORTH FEDERAL HWY SUITE 100
City-State-Zip:	BOCA RATON FL 33431

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: JOSHUA DAVIS PRES 04/29/2014

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