

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000108855

Entity Name: 2K MEDICAL, LLC

Current Principal Place of Business:

17210 NW 32ND AVE
NEWBERRY, FL 32669

Current Mailing Address:

17210 NW 32ND AVE
NEWBERRY, FL 32669 US

FEI Number: 20-3756925

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KLODELL, CHARLES
17210 NW 32ND AVE
NEWBERRY, FL 32669 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 MGRM
Name KLODELL, CHARLES
Address 17210 NW 32ND AVE
City-State-Zip: NEWBERRY FL 32669

Title MGRM
Name KLODELL, CYNTHIA
Address 17210 NW 32ND AVE
City-State-Zip: NEWBERRY FL 32669

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: CHARLES T. KLODELL

CEO

01/24/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date