

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000118427

Entity Name: MEDEXPRESS DEVELOPMENT, LLC

Current Principal Place of Business:

423 FORTRESS BLVD.
MORGANTOWN, WV 26508

Current Mailing Address:

423 FORTRESS BLVD.
MORGANTOWN, WV 26508 US

FEI Number: 20-3824377

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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 ASSISTANT SECRETARY
Name LANG, HEATHER ANASTASIA
Address 9900 BREN ROAD EAST
City-State-Zip: MINNETONKA MN 55343

Title MEMBER
Name URGENT CARE MSO, LLC
Address 423 FORTRESS BLVD.
City-State-Zip: MORGANTOWN WV 26508

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: HEATHER ANASTASIA LANG

ASSISTANT SECRETARY 04/22/2023

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date