## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000009549

Entity Name: PRESCRIPT LLC

FILED
Jul 25, 2017
Secretary of State
CC3740105842

**Current Principal Place of Business:** 

9305 MANGROVE CT TAMPA, FL 33647

## **Current Mailing Address:**

9305 MANGROVE CT TAMPA FL 33647

FEI Number: 26-1969333 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PATEL, LAKIR S 9305 MANGROVE CT TAMPA FL 33647 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 PATEL, LAKIR S
Address 9305 MANGROVE CT
City-State-Zip: TAMPA FL 33647

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: LAKIR PATEL MGR 07/25/2017