

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000048908

Entity Name: VIRTUALMED, LLC

Current Principal Place of Business:

16899 NE 15TH AVENUE
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

16899 NE 15TH AVENUE
NORTH MIAMI BEACH, FL 33162 US

FEI Number: 26-2657704

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BERND WOLLSCHLAEGEGER, MD PA
16899 NE 15TH AVENUE
NORTH MIAMI BEACH, FL 33162 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: BERND WOLLSCHLAEGEGER, MD

04/30/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name WOLLSCHLAEGEGER, BERND
Address 16899 N.E. 15TH AVENUE
City-State-Zip: NORTH MIAMI BEACH FL 33162

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: BERND WOLLSCHLAEGEGER

MGRM

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date