

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000058004

Entity Name: INNOVATIVE THERAPY SERVICES, LLC

Current Principal Place of Business:

100 SE 3RD AVENUE SUITE 1000
FORT LAUDERDALE, FL 33394

Current Mailing Address:

100 SE 3RD AVENUE SUITE 1000
FORT LAUDERDALE, FL 33394 US

FEI Number: 27-0366345

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, JULIET A
1597 SW 194TH TERRACE
PEMBROKE PINES, FL 33029 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 WILLIAMS, JULIET A
Address 100 SE 3RD AVENUE SUITE 1000
City-State-Zip: FORT LAUDERDALE FL 33394

Title MGR
Name WILLIAMS, ROBERT O
Address 100 SE 3RD AVENUE SUITE 1000
City-State-Zip: FORT LAUDERDALE FL 33394

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: JULIET WILLIAMS

MANAGER

04/29/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date