MYERS, KATHLEEN 14636 MIRASOL MANNOR CT. TAMPA, FL 33626 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	: KATHLEEN MYERS			02/04/2020
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MANAGER	
Name	MYERS, ADAM	Name	BRAUN, AARON	
Address	14636 MIRASOL MANNOR CT.	Address	1207 MISSOURI ST.	
City-State-Zip:	TAMPA FL 33626	City State Zin:		

Current Mailing Address:

20910 ATASCOCITA POINT DR.

FEI Number: 27-0512770

Name and Address of Current Registered Agent:

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: ADAM MYERS

MANAGER

02/04/2020

Electronic Signature of Signing Authorized Person(s) Detail

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000065012

Entity Name: PRESCRIBING SOLUTIONS LLC

Current Principal Place of Business:

14636 MIRASOL MANNOR CT. TAMPA, FL 33626

HUMBLE, TX 77346 US

Certificate of Status Desired: No

City-State-Zip: HOUSTON TX 77006

FILED Feb 04, 2020 Secretary of State 7205090817CC

Date