

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000075360

Entity Name: POLYMEDCO METABOLIC SYSTEMS LLC

Current Principal Place of Business:

1819 MAIN STREET, STE. 403
SARASOTA, FL 34236

Current Mailing Address:

1819 MAIN STREET, STE. 403
SARASOTA, FL 34236 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CERVASIO, ANDREW
1819 MAIN STREET
403
SARASOTA, FL 34236 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 MGRM
Name CERVASIO, ANDREW
Address 1819 MAIN STREET, STE. 403
City-State-Zip: SARASOTA FL 34236

Title MGR
Name WELSH, PETER
Address 1819 MAIN STREET, STE. 403
City-State-Zip: SARASOTA FL 34236

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: ANDREW CERVASIO

MANAGING MEMBER

01/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date