

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000119676

**Entity Name:** ASSURED TOXICOLOGY SOLUTIONS, LLC

**Current Principal Place of Business:**

4201 VINELAND ROAD  
SUITE I-12  
ORLANDO, FL 32811

**Current Mailing Address:**

4201 VINELAND ROAD  
SUITE I-12  
ORLANDO, FL 32811

**FEI Number:** 45-3664782

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SMITH AEBEL, ERIN ESQ.  
101 E. KENNEDY BLVD., SUITE 2800  
TAMPA, FL 33602 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	Title	MGR
Name	LOCKE, SHANE D	Name	LAGANO, TIMOTHY PAUL
Address	4201 VINELAND ROAD	Address	4201 VINELAND ROAD
City-State-Zip:	ORLANDO FL 32811	City-State-Zip:	ORLANDO FL 32811

*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:** SHANE D LOCKE

MGR

01/10/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date