

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000000670

Entity Name: ABX HEALTHCARE SOLUTIONS, LLC

Current Principal Place of Business:

1855 WEST SR 434
LONGWOOD, FL 32750

Current Mailing Address:

1855 WEST SR 434
LONGWOOD, FL 32750 US

FEI Number: 45-4130184

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FALCO, BERNARD JJR.
1855 WEST SR 434
LONGWOOD, FL 32750 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 FALCO, BERNARD JJR.
Address 1855 WEST SR 434
City-State-Zip: LONGWOOD FL 32750

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: BERNARD FALCO

PRES

03/29/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date