

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000070453

Entity Name: 1ST CHOICE HEALTHCARE SOLUTIONS LLC

Current Principal Place of Business:

4559 N PINE ISLAND
SUNRISE, FL 33351

Current Mailing Address:

4559 N PINE ISLAND ROAD
SUNRISE, FL 33351 US

FEI Number: 45-5378975

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KASHOU, JASON
4559 N PINE ISLAND
SUNRISE, FL 33351 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: JASON KASHOU

02/26/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title CEO
Name KASHOU, JASON
Address 4559 N PINE ISLAND
City-State-Zip: SUNRISE FL 33351

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: JASON KASHOU

CEO

02/26/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date