

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000026201

Entity Name: GENESIS PROHEALTH LLC

Current Principal Place of Business:

4615 CAPITAL DR.
LAKE WORTH, FL 33463

Current Mailing Address:

4615 CAPITAL DR.
LAKE WORTH, FL 33463 US

FEI Number: 46-2075785

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MICHEL, KARL H
4615 CAPITAL DR.
LAKE WORTH, FL 33463 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 MICHEL, KARL H
Address 4615 CAPITAL DR.
City-State-Zip: LAKE WORTH FL 33463

Title MGRM
Name SAINTANNE, CLAUDIA
Address 4615 CAPITAL DR.
City-State-Zip: LAKE WORTH FL 33463

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: KARL MICHEL

PRINCIPAL

05/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date