#### 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000093891

Entity Name: TREASURE COAST MEDICAL CONCIERGE, LLC

FILED
Jan 26, 2016
Secretary of State
CC3924262583

# **Current Principal Place of Business:**

2384B SE OCEAN BLVD. STUART, FL 34996

# **Current Mailing Address:**

2384B SE OCEAN BLVD. STUART, FL 34996 US

FEI Number: 46-3134570 Certificate of Status Desired: No

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

ROBBINS, HOWARD 2384B SE OCEAN BLVD. STUART, FL 34996 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

Title MGRM

Name ROBBINS, HOWARD

Name KARDOS, LINDA

Address 2384B SE OCEAN BLVD.

Address 2384B SE OCEAN BLVD.

City-State-Zip: STUART FL 34996

City-State-Zip: STUART FL 34996

Title COO, CFO

Name ROBBINS, ALLISON

Address 2384B SE OCEAN BLVD.

City-State-Zip: STUART FL 34996

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: HOWARD ROBBINS

MANAGING MEMBER

01/26/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date