

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000093891

Entity Name: TREASURE COAST MEDICAL CONCIERGE, LLC

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
Name ROBBINS, HOWARD
Address 2384B SE OCEAN BLVD.
City-State-Zip: STUART FL 34996

Title MGRM
Name KARDOS, LINDA
Address 2384B SE OCEAN BLVD.
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: ALLISON ROBBINS

COO/CFO

01/12/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date