

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000165943

Entity Name: TELAGEN LLC

Current Principal Place of Business:

6721 THOMASVILLE RD.
SUITE 4
TALLAHASSEE, FL 32312

Current Mailing Address:

6721 THOMASVILLE RD.
SUITE 4
TALLAHASSEE, FL 32308 US

FEI Number: 46-4264930

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAMSEY, SHAWN
6721 THOMASVILLE RD.
SUITE 4
TALLAHASSEE, FL 32312 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, CHIEF MEDICAL OFFICER
Name RAMSEY, SHAWN
Address 1204-B MICCOSUKEE RD.
City-State-Zip: TALLAHASSEE FL 32308

Title CEO
Name HILL, DAVID A.
Address 1204-B MICCOSUKEE RD.
City-State-Zip: TALLAHASSEE FL 32308

Title COO
Name CRUM, LARRY D.
Address 1204-B MICCOSUKEE RD.
City-State-Zip: TALLAHASSEE FL 32308

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: DAVID HILL

CEO

03/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date