#### 2017 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L14000000846

Entity Name: SJS MEDICAL SOLUTIONS, LLC

**FILED** Jan 28, 2017 **Secretary of State** CC0109867507

## **Current Principal Place of Business:**

2068 MUIRFIELD WAY OLDSMAR, FL 34677

## **Current Mailing Address:**

2068 MUIRFIELD WAY OLDSMAR, FL 34677

FEI Number: 46-4493658 Certificate of Status Desired: No

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

WISEMAN, SHANE 2068 MUIRFIELD WAY OLDSMAR, FL 34677 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 CEO Title MANAGER

Address

WISEMAN, SHANE Name 2068 MUIRFIELD WAY Address

Name WISEMAN, JANINE 2068 MUIRFIELD WAY

City-State-Zip: OLDSMAR FL 34677

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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.