

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000015982

Entity Name: ABSOLUTE PHARMACY LLC

Current Principal Place of Business:

16011 N NEBRASKA AVE
103
TAMPA, FL 33549

Current Mailing Address:

16011 N NEBRASKA AVE
103
TAMPA, FL 33549 US

FEI Number: 46-4667801

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DETTLAFF, KARLA
16011 N NEBRASKA AVE
103
TAMPA, FL 33549 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: KARLA DETTLAFF

01/16/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name DETTLAFF, KARLA
Address 16011 N NEBRASKA AVE
103
City-State-Zip: TAMPA FL 33549

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: KARLA DETTLAFF

COO

01/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date