

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000069673

Entity Name: PRESCRIPTION ASSISTANCE 123 LLC

Current Principal Place of Business:

100 E LINTON BLVD
400A
DELRAY BEACH, FL 33446

Current Mailing Address:

100 E LINTON BLVD
400A
DELRAY BEACH, FL 33446 US

FEI Number: 46-5531379

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARJE, JOSHUA
100 E LINTON BLVD
400A
DELRAY BEACH, FL 33446 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
Name JOSHUA, ARJE
Address 100 E LINTON BLVD
 400A
City-State-Zip: DELRAY BEACH FL 33446

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: JOSHUA ARJE

CEO

01/11/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date