

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000158409

Entity Name: BASIS MEDICAL, LLC

Current Principal Place of Business:

4383 NORTHLAKE BLVD SUITE 309
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

4383 NORTHLAKE BLVD SUITE 309
PALM BEACH GARDENS, FL 33410 US

FEI Number: 47-2370346

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCUDERI, PHILIP
4383 NORTHLAKE BLVD SUITE 309
PALM BEACH GARDENS, FL 33410 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: PHILIP SCUDERI

06/30/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MBR
Name SCUDERI, PHILIP
Address 4383 NORTHLAKE BLVD SUITE 309
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MBR
Name SCUDERI, WENDY M
Address 4383 NORTHLAKE BLVD SUITE 309
City-State-Zip: PALM BEACH GARDENS FL 33410

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: PHILIP SCUDERI

MGR

06/30/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date