

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000130943

**Entity Name:** MEDED ADVISOR, LLC

**Current Principal Place of Business:**

27305 BUCCANEER DR  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

27305 BUCCANEER DR  
BONITA SPRINGS, FL 34135

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

DIAMANTE, PAULA  
27305 BUCCANEER DR  
BONITA SPRINGS, FL 34135 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:** PAULA DIAMANTE

04/16/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name DIAMANTE, PAULA  
Address 27305 BUCCANEER DR  
City-State-Zip: BONITA SPRINGS FL 34135

*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:** PAULA DIAMANTE

04/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date