1910 ORIENT F				
TAMPA, FL 33	619			
Current Mai	ling Address:			
1910 ORIEN TAMPA, FL				
FEI Number: 47-5111610			Certificate of Status Desired: Yes	
Name and A	ddress of Current Registered Agent:			
WILSON, LAWF 1910 ORIENT F TAMPA, FL 330	2D 519 US			
The above named	l entity submits this statement for the purpose of changi	na its reaistered office or reais	tered agent, or both, in the State of Flor	
SIGNATURE	, , , , , , , , , , , , , , , , , , , ,			ida.
	BR. LAWRENCE WILSON	.g		<sup>ida.</sup> 01/14/2018
Authorized	BR. LAWRENCE WILSON			01/14/2018
Authorized	Electronic Signature of Registered Agent	Title	AMBR	01/14/2018
	DR. LAWRENCE WILSON     Electronic Signature of Registered Agent  Person(s) Detail :		AMBR PRIOR, SAMANTHA	01/14/2018
Title	DR. LAWRENCE WILSON     Electronic Signature of Registered Agent Person(s) Detail :     AMBR	Title		01/14/2018 Date

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: LAWRENCE S WILSON, MD

CEO

01/14/2018

E: LAWRENCE S WILSON, MD

Electronic Signature of Signing Authorized Person(s) Detail

## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000155830

## Entity Name: MULTIPLE INNOVATIONS TO RECOVERY, LLC

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

FILED Jan 14, 2018 Secretary of State CC9772512348

Date