

2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L15000157255

Entity Name: HEALTH VENDORS LLC

Current Principal Place of Business:

2124 NE 123RD STREET
SUITE 212
MIAMI, FL 33181

Current Mailing Address:

2124 NE 123RD STREET
SUITE 212
MIAMI, FL 33181

FEI Number: 47-5095049

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COWLEY, VICTOR J
999 BRICKELL BAY DRIVE
2001
MIAMI, FL 33131 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: VICTOR J COWLEY

10/25/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name COWLEY, VICTOR J
Address 999 BRICKELL BAY DRIVE, #2001
City-State-Zip: MIAMI FL 33131

Title AMBR
Name HARDY, LILIAN L
Address 1000 QUAYSIDE TERRACE, #502
City-State-Zip: MIAMI FL 33138

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: VICTOR J COWLEY

PRESIDENT

10/25/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date