

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000016764

Entity Name: STERLING MEDICAL SOLUTIONS, LLC

Current Principal Place of Business:

765 TUMBLEBROOK DRIVE
PORT ORANGE, FL 32127

Current Mailing Address:

765 TUMBLEBROOK DRIVE
PORT ORANGE, FL 32127 US

FEI Number: 81-1350768

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WHITTIERMORE, MARIANNE
765 TUMBLEBROOK DRIVE
PORT ORANGE, FL 32127 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 MGR
Name WHITTIERMORE, MARIANNE
Address 765 TUMBLEBROOK DRIVE
City-State-Zip: PORT ORANGE FL 32127

Title MGR
Name WHITTIERMORE, LEWIS C
Address 765 TUMBLEBROOK DRIVE
City-State-Zip: PORT ORANGE FL 32127

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: MARIANNE WHITTIERMORE

MANAGER

02/19/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date