

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000080498

Entity Name: MEDTOUR LLC

Current Principal Place of Business:

2475 NW 95 AVE
SUITE 2
DORAL, FL 33172

Current Mailing Address:

2475 NW 95 AVE
SUITE 2
DORAL, FL 33172 US

FEI Number: 81-2435742

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PILETTI, GIANBATTISTA
2475 NW 95 AVE
SUITE 2
DORAL, FL 33172 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: GIANBATTISTA PILETTI

03/13/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR.
Name PILETTI, GIANBATTISTA
Address 2475 NW 95 AVE
SUITE 2
City-State-Zip: DORAL FL 33172

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: GIANBATTISTA PILETTI

MRG

03/13/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date