2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 04, 2019
Secretary of State
8043152437CC

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Entity Name: DESTINY MEDICAL PROFESSIONALS LLC

Current Principal Place of Business:

245 NE 14TH ST
APT 3713
MIAMI, FL 33132

Current Mailing Address:

245 NE 14TH ST
APT 3713
MIAMI, FL 33132 US

FEI Number: 81-4281991

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARIAS, MARCO A
245 NE 14TH ST
APT 3713
MIAMI, FL 33132 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	MANAGER
Name	ARIAS, MARCO A
Address	245 NE 14TH ST APT 3713
City-State-Zip:	MIAMI FL 33132

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: MARCO A ARIAS MANAGER 03/04/2019

Electronic Signature of Signing Authorized Person(s) Detail — Date