

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000005076

Entity Name: BIOFEEDBACK JAX, LLC

Current Principal Place of Business:

13810 SUTTON PARK DR N
#1227
JACKSONVILLE, FL 32224

Current Mailing Address:

13810 SUTTON PARK DR N
#1227
JACKSONVILLE, FL 32224 US

FEI Number: 81-4929889

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BELL, STEPHANIE K
13810 SUTTON PARK DR N
#1227
JACKSONVILLE, FL 32224 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 BELL, STEPHANIE K
Address 13810 SUTTON PARK DR N
#1227
City-State-Zip: JACKSONVILLE FL 32224

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: STEPHANIE K BELL

MGR

04/19/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date