## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000156217

Entity Name: MEDIX WELLNESS LLC

**Current Principal Place of Business:** 

20900 NE 30TH AVE STE 800 AVENTURA, FL 33180

**Current Mailing Address:** 

20900 NE 30TH AVE STE 800 AVENTURA, FL 33180 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SARFATI CORPORATE LAW, P.A. 2670 N.E. 215 STREET AVENTURA, FL 33180 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: DAN SARFATI, ESQ. 02/03/2020

Electronic Signature of Registered Agent

Date

FILED Feb 03, 2020

**Secretary of State** 

9213047042CC

Authorized Person(s) Detail:

Title MGRT Title MGRS

Name ORTIZ, SAUL Name LOZANO, MIGUEL A

Address 20900 NE 30TH AVE STE 800 Address 20900 NE 30TH AVE STE 800

City-State-Zip: AVENTURA FL 33180 City-State-Zip: AVENTURA FL 33180

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: SAUL ORTIZ CEO 02/03/2020