

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000164142

Entity Name: STRIVE MEDICAL LLC

Current Principal Place of Business:

8428 STERLING ST.
SUITE B
IRVING, TX 75063

Current Mailing Address:

8428 STERLING ST.
SUITE B
IRVING, TX 75063

FEI Number: 80-0213302

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DODSON, TRACEY
Address 8428 STERLING ST., STE B
City-State-Zip: IRVING TX 75063

Title MGR
Name ROSENTHAL, JOSH
Address 8428 STERLING ST., STE B
City-State-Zip: IRVING TX 75063

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: TRACEY DODSON

**DIRECTOR OF
ACCOUNTING**

01/23/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date