

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000170948

Entity Name: HEALTHPLUS SOLUTIONS OF FLORIDA LLC

Current Principal Place of Business:

5727 NW 7TH STREET
SUITE 337
MIAMI, FL 33126

Current Mailing Address:

5727 NW 7TH STREET
SUITE 337
MIAMI, FL 33126

FEI Number: 82-2485460

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GREENBERG LAW GROUP PA
2883 EXECUTIVE PARK DRIVE SUITE 200
WESTON, FL 33331 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 ABELAIRAS, GRISELLE
Address 5727 NW 7TH STREET
STE 337
City-State-Zip: MIAMI FL 33126

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: GRISELLE ABELAIRAS

MGR

04/12/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date