2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 05, 2020
Secretary of State
4742385620CR

DOCUMENT# L17000207768

Entity Name: CONCIERGE MED WEST LLC

Current Principal Place of Business:

7600 DR PHILLIPS BLVD
94
ORLANDO, FL 34768

Current Mailing Address:

7600 DR PHILLIPS BLVD
94
ORLANDO, FL 34768 US

FEI Number: 82-4332411

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CUTTER, MIKE DR.
3440 W HOLLYWOOD BLVD. SUITE 415
HOLLYWOOD, FL 33021 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: MIKE CUTTER 10/05/2020

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	AMBR	Title	REPRESENTATIVE
Name	CUTTER, LARRY	Name	MDCCUTTER@GMAIL.COM , MICHAEL DR.
Address	440 BUCKHAVEN LOOP	Address	7600 DR PHILLIPS BLVD 94
City-State-Zip:	OCOEE FL 34761	City-State-Zip:	ORLANDO FL 34768

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: LARRY CUTTER PRESIDENT 10/05/2020

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