

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000261593

Entity Name: LONGEVITI HEALTH, LLC

Current Principal Place of Business:

2645 EXECUTIVE PARK DRIVE
WESTON, FL 33331

Current Mailing Address:

2645 EXECUTIVE PARK DRIVE
WESTON, FL 33331 US

FEI Number: 82-3915530

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHREIBMAN, BARBARA H
2645 EXECUTIVE PARK DRIVE
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 AUTHORIZED MEMBER
Name PANOPTIC CONSULTING, LLC
Address 2645 EXECUTIVE PARK DRIVE
City-State-Zip: WESTON FL 33331

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: BARBARA HARRIET SCHREIBMAN

MANAGER

04/27/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date