Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L18000032954

Entity Name: CURIOTIC HEALTHCARE SERVICES LLC

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

11144 PARKSIDE PRESERVE WAY JACKSONVILLE, FL 32257

Current Mailing Address:

11144 PARKSIDE PRESERVE WAY JACKSONVILLE. FL 32257

FEI Number: 82-4486117

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

ARAVAMUTHAN, KRITHIGA 11144 PARKSIDE PRESERVE WAY JACKSONVILLE, FL 32257 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:

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	KESAVAN, SUMITHA	Name	ARAVAMUTHAN, KRITHIGA
Address	11144 PARKSIDE PRESERVE WAY	Address	11144 PARKSIDE PRESERVE WAY
City-State-Zip:	JACKSONVILLE FL 32257	City-State-Zip:	JACKSONVILLE FL 32257

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: KRITHIGA ARAVAMUTHAN

FILED Jan 28, 2020 Secretary of State 2807666705CC

Certificate of Status Desired: Yes

Date

01/28/2020

Date