

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000172769

Entity Name: HEALTH AFFIXED, LLC

Current Principal Place of Business:

2701 W. OAKLAND PARK BLVD.
STE. 410
OAKLAND PARK, FL 33311

Current Mailing Address:

2701 W. OAKLAND PARK BLVD.
STE. 410
OAKLAND PARK, FL 33311 US

FEI Number: 83-1265116

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLAIR, ESQ., SOPHIA NS
2701 W. OAKLAND PARK BLVD.
STE. 410
OAKLAND PARK, FL 33311 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 BLAIR, SOPHIA NS
Address 2701 W. OAKLAND PARK BLVD.
City-State-Zip: OAKLAND PARK FL 33311

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: SOPHIA NS BLAIR

MGR

02/17/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date