

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000175180

Entity Name: PATIENT RESOURCE NETWORK, LLC

Current Principal Place of Business:

893 WOODGATE TRAIL
LONGWOOD, FL 32750

Current Mailing Address:

893 WOODGATE TRAIL
LONGWOOD, FL 32750 US

FEI Number: 83-1702059

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HUDSON, ZACHIARY J
893 WOODGATE TRAIL
LONGWOOD, FL 32750 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: ZACHIARY J. HUDSON

01/04/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name HUDSON, ZACHIARY
Address 893 WOODGATE TRAIL
City-State-Zip: LONGWOOD FL 32750

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: ZACHIARY J. HUDSON

MGR.

01/04/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date