

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000231765

Entity Name: APOLLO HEALTHCARE SOLUTIONS LLC

Current Principal Place of Business:

19463 BEACON PARK PLACE
BRADENTON, FL 34202

Current Mailing Address:

8430 ENTERPRISE CIRCLE SUITE 200
LAKEWOOD RANCH, FL 34202 US

FEI Number: 83-2216817

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHLOTTHAUER, WILLIAM
8430 ENTERPRISE CIRCLE SUITE 200
LAKEWOOD RANCH, FL 34202 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: WILLIAM SCHLOTTHAUER

06/29/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name FLYNN, BRIAN
Address 19463 BEACON PARK PLACE
City-State-Zip: BRADENTON FL 34202

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: BRIAN FLYNN

MANAGER

06/29/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date