

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000267589

**Entity Name:** IVELINA HEALTH ADVISORY SERVICES LLC

**Current Principal Place of Business:**

5402 W LAUREL STR  
SUITE 109  
TAMPA, FL 33607

**Current Mailing Address:**

5402 W LAUREL STR  
SUITE 109  
TAMPA, FL 33607 US

**FEI Number:** 83-3153148

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DIMITROVA, IVELINA  
5402 W LAUREL STR  
SUIT 109  
TAMPA, FL 33607 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:** IVELINA DIMITROVA

01/27/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name DIMITROVA, IVELINA  
Address 5402 W LAUREL STR  
SUITE 109  
City-State-Zip: TAMPA FL 33607

*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:** IVELINA DIMITROVA

**PRESIDENT**

01/27/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date