

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000203105

Entity Name: MEDERI HEALTH SOLUTIONS, LLC

Current Principal Place of Business:

12384 SW 82ND AVE.
PINECREST, FL 33156

Current Mailing Address:

12384 SW 82ND AVE.
PINECREST, FL 33156

FEI Number: 84-3431315

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SASSO, PAUL R ESQ.
12384 SW 82ND AVE.
PINECREST, FL 33156 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 MANAGER
Name SASSO, PAUL R.
Address 12384 SW 82ND AVE.
City-State-Zip: PINECREST FL 33156

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: PAUL SASSO

MANAGER

01/31/2020

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date