

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000244564

**Entity Name:** EFFECTIVE MEDICAL LLC

**Current Principal Place of Business:**

5575 E CO RD 44  
WILDWOOD, FL 34785

**Current Mailing Address:**

5575 E CO RD 44  
WILDWOOD, FL 34785

**FEI Number:** 84-3342377

**Certificate of Status Desired:** No

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

TOLENTINO, EDUARDO  
5575 E CO RD 44  
WILDWOOD, FL 34785 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 AP  
Name TOLENTINO, EDUARDO  
Address 5575 E CO RD 44  
City-State-Zip: WILDWOOD FL 34785

*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:** TOLENTINO , EDUARDO

AP

03/23/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date