

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000282420

Entity Name: 360 HEALTH SERVICES LLC

Current Principal Place of Business:

4651 N ST RD 7
STE 8
CORAL SPRINGS, FL 33073

Current Mailing Address:

4651 N ST RD 7
STE 8
CORAL SPRINGS, FL 33073 US

FEI Number: 84-3842322

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LEVERAGE MANAGEMENT SOLUTIONS LLC
20423 STATE RD 7
F6 244
BOCA RATON, FL 33498 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	MGR	Title	AMBR
Name	PAPE, NICHOLAS	Name	JENKINS, NICHOLAS
Address	4651 N ST RD 7 STE 8	Address	4651 N ST RD 7 STE 8
City-State-Zip:	CORAL SPRINGS FL 33073	City-State-Zip:	CORAL SPRINGS FL 33073

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: NICHOLAS PAPE

COO

04/22/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date