

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000445159

Entity Name: COLLEGIATE HEALTH SOLUTIONS LLC

Current Principal Place of Business:

600 CLEVELAND STREET
STE 260
CLEARWATER, FL 33755

Current Mailing Address:

600 CLEVELAND STREET
STE 260
CLEARWATER, FL 33755 US

FEI Number: 92-0923777

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BURNS, ARTHUR
600 CLEVELAND STREET
260
CLEARWATER, FL 33755 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
Name BURNS, ARTHUR
Address 600 CLEVELAND STREET
STE 260
City-State-Zip: CLEARWATER FL 33755

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: ARTHUR BURNS

MANAGER

02/20/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date