

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000477297

**Entity Name:** EXPONENT OUTCOMES, LLC

**Current Principal Place of Business:**

235 APOLLO BEACH BLVD  
SUITE 332  
APOLLO BEACH, FL 33573

**Current Mailing Address:**

235 APOLLO BEACH BLVD  
SUITE 332  
APOLLO BEACH, FL 33573

**FEI Number:** 88-4274372

**Certificate of Status Desired:** No

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

WIETING, YVONNE  
235 APOLLO BEACH BLVD  
SUITE 332  
APOLLO BEACH, FL 33572 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            AMGR  
Name            FLAX, STEVEN  
Address        915 SYMPHONY BEACH LANE  
City-State-Zip: APOLLO BEACH FL 33572

Title            AMBR  
Name            FLAX, DAVID  
Address        3900 SPRUCE CREEK DR  
City-State-Zip: LAKELAND FL 33811

*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:** DAVID FLAX

AMBR

04/20/2023

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date