## 2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000003814

Entity Name: NUTRIMOST DOCTORS, LLC

### Current Principal Place of Business:

10483 FRANKSTOWN ROAD PITTSBURGH, PA 15235

## **Current Mailing Address:**

1 PRIORITY LANE, BOX 419 MURRYSVILLE, PA 15668 US

# FEI Number: 46-5393773

### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:	RAYMOND C. WISNIEWSKI

Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

Title	MBR
Name	WISNIEWSKI, RAY DR.
Address	10483 FRANKSTOWN ROAD
City-State-Zip:	PITTSBURGH PA 15235

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: RAYMOND WISNIEWSKI

Electronic Signature of Signing Authorized Person(s) Detail

MEMBER

01/23/2017 Date

Jan 23, 2017 Secretary of State CC3921659828

FILED

Certificate of Status Desired: No

01/23/2017

Date