## 2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000001125

Entity Name: JELLYFISH HEALTH, LLC

**Current Principal Place of Business:** 

4404 BAYOU OAKS DRIVE PANAMA CITY, FL 32404

**Current Mailing Address:** 

4404 BAYOU OAKS DRIVE PANAMA CITY, FL 32404

FEI Number: 47-1750846 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

FILED Apr 15, 2016

**Secretary of State** 

CC2560461462

## Authorized Person(s) Detail:

Title MGRM

Name DYELL, DAVE

Address 4404 BAYOU OAKS DRIVE City-State-Zip: PANAMA CITY FL 32404

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.

Electronic Signature of Signing Authorized Person(s) Detail