## 2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M17000000083

Entity Name: PRAXIS MED INTERNATIONAL LLC

**Current Principal Place of Business:** 

13600 SHORELINE DR, STE 200 EARTH CITY, MO 63045

**Current Mailing Address:** 

3030 N ROCKY POINT DR, STE 150A TAMPA FL 33607 US

FEI Number: 26-0214600 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC 3030 N ROCKY POINT DR, STE 150A TAMPA, FL 33607 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 Feb 14, 2018

**Secretary of State** 

CC1619408691

## Authorized Person(s) Detail:

Title MBR

Name ROBERTSON, ANTHONY
Address 484 E CARMEL DR, STE 305

City-State-Zip: CARMEL IN 46032

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: ANTHONY ROBERTSON

PRESIDENT & CEO

02/14/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date