


2002-2003
**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

102

DOCUMENT # 101000022656

1. Entity Name
Med Axiom, LLC



FILED

03 MAY 14 PM 12:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <u>200 First St.</u> Suite, Apt. #, etc. <u>Suite 203</u> City & State <u>Neptune Beach, FL</u> Zip <u>32266</u> Country <u>Duvz1</u>		3. Mailing Address <u>200 First St.</u> Suite, Apt. #, etc. <u>Suite 203</u> City & State <u>Neptune Beach, FL</u> Zip <u>32266</u> Country <u>Duvz1</u>	
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4. FEI Number ☐ Applied For ☒ Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Jennifer Linville

Street Address (P.O. Box Number is Not Acceptable)
205 Oceanforest Dr. N.

City Atlantic Beach FL Zip Code 32233

8. 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. I am familiar with, and accept the obligations of registered agent:

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. DATE _____

FEE IS \$50.00
Make Check Payable to Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President</u> <u>Jennifer J Linville</u> <u>205 Oceanforest Dr. N.</u> <u>Atlantic Beach, FL 32233</u>
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4/15/03

CR2E083B (12/02)



MEDAxiom

Complete Business Solutions for Medical Practices

2da

April 15, 2003

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Division of Corporations
Florida Department of State
Tallahassee, FL.

To Whom it May Concern:

Please be advised that we did not receive our UBR for the year 2002. We will be filing this year for both 2002 and 2003. Please re-instate the MEDAxiom, LLC corporation. If you have any comments or questions please do not hesitate to call me at 904-249-1880.

Sincerely,

Jennifer Linville