

L160000062197

Mena Awad

(Requestor's Name)

1052 S. Powerline Rd Suite C

(Address)

(Address)

Deerfield Beach, FL 33442

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☒ MAIL

All med Pharmacy

(Business Entity Name)

L160000062197

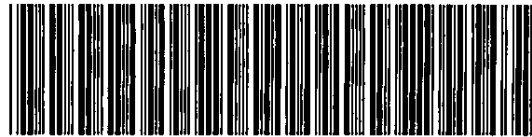
(Document Number)

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04/06/17--01015--005 **35.00

FILED

2017 MAY 11 P 4:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BRUCE
MAY 12 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 25, 2017

MENA AWAD
1052 S POWERLINE RD, STE C
DEERFIELD BEACH, FL 33442

SUBJECT: ALL MED PHARMACY, LLC
Ref. Number: L16000062197

We have received your document for ALL MED PHARMACY, LLC and your check(s) totaling \$90.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 317A00008048

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2017 MAY 11 AM 11:05
TALLAHASSEE, FLORIDA

2017 MAY 11 PM 4:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 11, 2017

MENA AWAD
1052 S POWERLINE ROAD, STE C
DEERFIELD BEACH, FL 33442

SUBJECT: ALL MED PHARMACY, LLC
Ref. Number: L16000062197

RECEIVED
2017 APR 24 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for ALL MED PHARMACY, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 117A00006999

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2017 MAY 11 P 4:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: All med Pharmacy
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mena Awad
Name of Person

All med Pharmacy
Firm/Company

1052 S. Powerline Rd. Suite C
Address

Deerfield Beach, FL 33442
City/State and Zip Code

mena@HFInfusion.Com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mena Awad at (404)
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 MAY 11 P 4:44

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: All med pharmacy
2. (a) 1052 S. Powerline Rd. Suite C
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
Deerfield Beach, FL 33442
- (b) 1052 S. Powerline Rd Suite C
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Deerfield Beach, FL 33442

3. 4/17/2017
Date of filing/registration in Florida
4. L16000062197
Document number

5. (a) Akram Girgis
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1052 S. Powerline Rd Suite C
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Deerfield Beach, FL 33442

- (b) Mena Awad
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

1052 S. Powerline Rd. suite C
Deerfield Beach, FL 33442

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

Mena Awad
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent

FILED
2017 MAY 11 P 4:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA