

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000074940

Entity Name: MEDOPTIONS NETWORK SOLUTIONS LLC

Current Principal Place of Business:

12973 SW 112 STREET
SUITE 175
MIAMI, FL 33186

Current Mailing Address:

12973 SW 112 STREET
SUITE 175
MIAMI, FL 33186 US

FEI Number: 20-3484528

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANTANA, JOHN HSA
12973 SW 112 STREET
SUITE 175
MIAMI, FL 33186 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: JOHN SANTANA, HSA

01/26/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name SANTANA, JOHN
Address 12973 SW 112 STREET
SUITE 175
City-State-Zip: MIAMI FL 33186

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: JOHN SANTANA

GENERAL MANAGER

01/26/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date