## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000095480

Entity Name: AGELESS MEDICAL SOLUTIONS, LLC

FILED
Apr 15, 2016
Secretary of State
CC9208280632

## **Current Principal Place of Business:**

6224 NW 43RD STREET SUITE A GAINESVILLE, FL 32653

## **Current Mailing Address:**

8108 SW 10TH PLACE GAINESVILLE, FL 32607

FEI Number: 20-3628363 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

AKEY, TIMOTHY P 8108 SW 10TH PLACE GAINESVILLE, FL 32607 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: TIMOTHY P. AKEY 04/15/2016

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGRM Title MGRM

NameAKEY, TIMOTHY PNameAKEY, ANGELI MAddress8108 SW 10TH PLACEAddress8108 SW 10TH PLACECity-State-Zip:GAINESVILLE FL 32607City-State-Zip:GAINESVILLE FL 32607

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: TIMOTHY P. AKEY MGRM 04/15/2016