2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 18, 2013
Secretary of State
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Entity Name: AGELESS MEDICAL SOLUTIONS, LLC

Current Principal Place of Business:

6400 W. NEWBERRY ROAD
SUITE 109
GAINESVILLE, FL 32605

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:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	AKEY, TIMOTHY P	Name	AKEY, ANGELI M
Address	8108 SW 10TH PLACE	Address	8108 SW 10TH PLACE
City-State-Zip:	GAINESVILLE FL 32607	City-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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANGELI AKEY OWNER 01/18/2013

Electronic Signature of Signing Authorized Person(s) Detail — Date