

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000042113

FILED
Feb 06, 2019
Secretary of State
4319727920CC

Entity Name: NOVUS MEDICAL DETOX CENTERS, LLC

Current Principal Place of Business:

9270 ROYAL PALM AVE.
NEW PORT RICHEY, FL 34654

Current Mailing Address:

9270 ROYAL PALM AVE.
NEW PORT RICHEY, FL 34654 US

FEI Number: 71-1003223

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WESCH, BRYN A
9270 ROYAL PALM AVENUE
NEW PORT RICHEY, FL 34654 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 MANAGER
Name CAREZ CORPORATION
Address 1130 CLEVELAND STREET
 SUITE 130
City-State-Zip: CLEARWATER FL 33755

Title CEO
Name WESCH, BRYN A
Address 9270 ROYAL PALM AVE.
City-State-Zip: NEW PORT RICHEY FL 34654

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: BRYN WESCH

CEO

02/06/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date