## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000112417

Entity Name: FEMLIFE HEALTHCARE FOR WOMEN, LLC

**Current Principal Place of Business:** 

17901 NW 5 STREET STE 202 HOLLYWOOD, FL 33029

**Current Mailing Address:** 

3225 AVIATION AVE STE 700 MIAMI. FL 33133

FEI Number: 54-2129332 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YELEN, MITCHELL A 3225 AVIATION AVE STE 500 MIAMI, FL 33133-4741 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

**FILED** Apr 21, 2015

**Secretary of State** 

CC0039793498

## Authorized Person(s) Detail:

Title MGRM

Name VITALMD GROUP HOLDING, LLC Address 3225 AVIATION AVE SUITE 700

City-State-Zip: MIAMI FL 33133

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: KYLIE WAGENET

VP CORPORATE LEGAL COUNSEL

04/21/2015