2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2015
Secretary of State
CC2058356730

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Entity Name: MY MEDICAL ACCESS LLC

Current Principal Place of Business:

1278 SW HIGH POINT LANE
PALM CITY, FL 34990

Current Mailing Address:

1278 SW HIGH POINT LANE
PALM CITY , FL 34990 US

FEI Number: 11-3840376

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARROLL, JOSHUA
1278 SW HIGH POINT LANE
PALM CITY, FL 34990 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	MGR
Name	CARROLL, JOSHUA
Address	1278 SW HIGH POINT LANE
City-State-Zip:	PALM CITY FL 34990

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: JOSHUA CARROLL MANAGING MEMBER 04/27/2015

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