2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 22, 2015
Secretary of State
CC3002751641

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Entity Name: HOUSE MEDICS LLC

Current Principal Place of Business:

23951 N.E. 187TH PLACE
FT MCCOY, FL 32134

Current Mailing Address:

P.O. BOX 5506
SALT SPRINGS, FL 32134

FEI Number: 26-1873712

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BUSH, MATTHEW POWNER
23951 N.E. 187TH PLACE
FT MCCOY, FL 32134 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	Title	S
Name	BUSH, MATTHEW	Name	BUSH, MATTHEW
Address	23951 N.E. 187TH PLACE	Address	23951 N.E. 187TH PLACE
City-State-Zip:	FT. MCCOY FL 32134	City-State-Zip:	FT. MCCOY FL 32134

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: MATTHEW BUSH MANAGER 02/22/2015

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