

2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000056713

Entity Name: TELEMED, LLC

Current Principal Place of Business:

4604 SHEPHERD ROAD
PLANT CITY, FL 33565

Current Mailing Address:

4604 SHEPHERD RD
PLANT CITY, FL 33565 US

FEI Number: 90-0499329

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARRISON, LISA M
2501 WALDEN WOODS DRIVE
5756
PLANT CITY, FL 33563 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: LISA HARRISON

05/28/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name HARRISON, LISA
Address 4604 SHEPHERD ROAD
City-State-Zip: PLANT CITY FL 33565

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: LISA HARRISON

CEO

05/28/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date