

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000076331

Entity Name: INNOVATION MEDICAL TECHNOLOGIES, LLC

Current Principal Place of Business:

516 TAMIAMI TRAIL S
202
NOKOMIS, FL 34275

Current Mailing Address:

516 TAMIAMI TRAIL S
202
NOKOMIS, FL 34275 US

FEI Number: 27-3079965

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAXSON, LISA G
516 TAMIAMI TRAIL S
202
NOKOMIS, FL 34275 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	MGR
Name	MAXSON, CHRISTOPHER	Name	MAXSON, LISA
Address	516 TAMIAMI TRAIL S 202	Address	516 TAMIAMI TRAIL S 202
City-State-Zip:	NOKOMIS FL 34275	City-State-Zip:	NOKOMIS FL 34275

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 MAXSON

MGR

02/26/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date