

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000109316

Entity Name: VERIMED HEALTH GROUP TRINITY, LLC

Current Principal Place of Business:

7611 CITA LANE
SUITE 101
NEW PORT RICHEY, FL 34653

Current Mailing Address:

7611 CITA LANE
SUITE 101
NEW PORT RICHEY, FL 34653 US

FEI Number: 27-3716433

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REVELLO, MARTIN
26838 TANIC DRIVE
WESLEY CHAPEL, FL 33544 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 AUTHORIZED MEMBER
Name VERIMED HEALTH GROUP
HOLDINGS, LLC
Address 26838 TANIC DRIVE
City-State-Zip: WESLEY CHAPEL FL 33544

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: MARTIN REVELLO

**AUTHORIZED
REPRESENTATIVE**

04/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date