

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000130244

Entity Name: AXIOM HEALTH, LLC

Current Principal Place of Business:

1801 N FLAGLER DRIVE #912
WEST PALM BEACH, FL 33407

Current Mailing Address:

1801 N FLAGLER DRIVE #912
WEST PALM BEACH, FL 33407 US

FEI Number: 27-4341429

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAHARAJ, SAVIANNE
1801 N FLAGLER DRIVE
912
WEST PALM BEACH, FL 33407 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 MGRM
Name MAHARAJ, SAVIANNE
Address 1801 N FLAGLER DRIVE #912
City-State-Zip: WEST PALM BEACH FL 33407

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: SAVIANNE VINTON MAHARAJ

OWNER

01/14/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date