

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000075318

Entity Name: HYBRID REMEDIES, LLC

Current Principal Place of Business:

9310 OLD KINGS ROAD SOUTH
1603
JACKSONVILLE, FL 32257

Current Mailing Address:

9310 OLD KINGS ROAD SOUTH
1603
JACKSONVILLE, FL 32257 US

FEI Number: 45-5469303

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUBOIS, JASON YVES
9310 OLD KINGS ROAD SOUTH
1603
JACKSONVILLE, FL 32257 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: JASON YVES DUBOIS

04/10/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title COO
Name DUBOIS, JASON Y DR.
Address 9310 OLD KINGS ROAD SOUTH
1603
City-State-Zip: JACKSONVILLE FL 32257

Title MEMBER
Name THOMAS, CHAD
Address 9310 OLD KINGS ROAD SOUTH
1603
City-State-Zip: JACKSONVILLE FL 32257

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: JASON DUBOIS

COO

04/10/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date