

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000096223

Entity Name: AGEVITAL PHARMACY, LLC

Current Principal Place of Business:

16 S. BLVD OF THE PRESIDENTS
SARASOTA, FL 34236

Current Mailing Address:

16 S. BLVD OF THE PRESIDENTS
SARASOTA, FL 34236

FEI Number: 46-0649252

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUSINBERRE, PLLC
105 EAST PALMETTO PARK ROAD
SUITE A
BOCA RATON, FL 33432 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	AMBR	Title	AMBR
Name	WILKINS, WILLIAM M	Name	WILKINS, JENNY P
Address	16 S. BLVD OF THE PRESIDENTS	Address	16 S. BLVD OF THE PRESIDENTS
City-State-Zip:	SARASOTA FL 34236	City-State-Zip:	SARASOTA FL 34236

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: JENNY P. WILKINS

AMBR

05/01/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date