

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000017217

Entity Name: KELLER MEDICAL SOLUTIONS, LLC

Current Principal Place of Business:

445 FOREST TRAIL
OVIEDO, FL 32765

Current Mailing Address:

445 FOREST TRAIL
OVIEDO, FL 32765 US

FEI Number: 46-2025655

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KELLER, DAVID A
445 FOREST TRAIL
OVIEDO, FL 32765 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: DAVID A KELLER

02/03/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name KELLER, DAVID
Address 445 FOREST TRAIL
City-State-Zip: OVIEDO FL 32765

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: DAVID KELLER

MGRM

02/03/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date