Name and Address of Current Registered Agent:				
SIDDIQUI, AMNA I 2441 SOUTH HIAWASSEE RD ORLANDO, FL 32835 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	: AMNA I SIDDIQUI			04/30/2017
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MANAGER	Title	MEMBER	
Name	SIDDIQUI, HAREEM	Name	SIDDIQUI, AMNA	
Address	2441 SOUTH HIAWASSEE RD	Address	2441 SOUTH HIAWASSEE ROAI	D
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ORLANDO FL 32835	

## **Current Mailing Address:**

2441 SOUTH HIAWASSEE RD ORLANDO, FL 32835

DOCUMENT# L13000115234

2441 SOUTH HIAWASSEE RD ORLANDO, FL 32835

## FEI Number: 47-1728584

## سامام ۸ .... 4 D . . Na

Entity Name: IMS MEDICAL SOLUTIONS LLC

**Current Principal Place of Business:** 

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: AMNA SIDDIQUI

04/30/2017

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 30, 2017 Secretary of State CC3871574508

Certificate of Status Desired: No

## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

MANGER

Date