2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000123900

Entity Name: ALLCARE MEDICAL OF FLORIDA, LLC

Current Principal Place of Business:

111 KELSEY LANE,

SUITE F

TAMPA, FL 33619

Current Mailing Address:

330 PELHAM ROAD, SUITE A201

GREENVILLE, SC 29615 US

FEI Number: 46-3626920 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SLIVA, ONDREJ 111 KELSEY LN SUITE F TAMPA, FL 33619 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

FILED Jan 29, 2021

Secretary of State

1041071296CC

Authorized Person(s) Detail:

Title **MGRM** Title VΡ

SLIVA, ONDREJ CRAWFORD, AMY K Name Name Address 330 PELHAM ROAD, Address 330 PELHAM ROAD, SUITE A201

SUITE A201

GREENVILLE SC 29615 GREENVILLE SC 29615 City-State-Zip: City-State-Zip:

Title

Name CAMPBELL, JOHN 111 KELSEY LANE, Address

SUITE F

SIGNATURE: AMY CRAWFORD

TAMPA FL 33619 City-State-Zip:

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.

Electronic Signature of Signing Authorized Person(s) Detail

VICE PRESIDENT

01/29/2021

Date