

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000065824

Entity Name: MEDICAL DNA LABS, LLC

Current Principal Place of Business:

3450 FLETCHER AVE
SUITE 230A
TAMPA, FL 33613

Current Mailing Address:

4730 N HABANA AVE, SUITE 204
TAMPA, FL 33614

FEI Number: 46-5553897

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KOCHE, DAVID L
601 BAYSHORE BLVD, SUITE 700
TAMPA, FL 33606 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 MANAGER
Name WOOD, DAVID A
Address 4730 N HABANA AVE
 204
City-State-Zip: TAMPA FL 33614

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 A WOOD

MANAGER

04/09/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date