2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2019
Secretary of State
3483378366CC

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Entity Name: OXYGENIX SOLUTIONS LLC

Current Principal Place of Business:

467 PARKSIDE CIRCLE
CRAWFORDVILLE, FL 32327

Current Mailing Address:

467 PARKSIDE CIRCLE
CRAWFORDVILLE, FL 32327 US

FEI Number: 46-5686068

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VICKERS, JACKIE L
467 PARKSIDE CIRCLE
CRAWFORDVILLE, FL 32327 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	VICKERS, JACKIE L JR.	Name	VICKERS, TINA M
Address	467 PARKSIDE CIRCLE	Address	467 PARKSIDE CIRCLE
City-State-Zip:	CRAWFORDVILLE FL 32327	City-State-Zip:	CRAWFORDVILLE FL 32327

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: TINA VICKERS 04/28/2019

Electronic Signature of Signing Authorized Person(s) Detail — Date