

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000079781

Entity Name: VALUE HEALTH, LLC

Current Principal Place of Business:

21000 NE 28TH AVENUE
SUITE 202
AVENTURE, FL 33180

Current Mailing Address:

21000 NE 28TH AVENUE
SUITE 202
AVENTURE, FL 33180

FEI Number: 46-5686418

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLORIDA HEALTH LAW CENTER, PL
10200 W. STATE ROAD 84
SUITE 106
DAVIE, FL 33324 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 MGR
Name OSTERMAN, FLOYD
Address 21000 NE 28TH AVENUE #202
City-State-Zip: AVENTURA FL 33180

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: FLOYD OSTERMAN

MANAGER

02/18/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date