

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000139564

Entity Name: ONEHEALTH CONNECT, LLC

Current Principal Place of Business:

1319 DONALD ST.
JACKSONVILLE, FL 32205

Current Mailing Address:

1319 DONALD ST.
JACKSONVILLE, FL 32205 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS, INC.
3030 N. ROCKY POINT DR.
STE 150A
TAMPA, FL 33607 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 TAYLOR, CHERYL L
Address 1319 DONALD ST
City-State-Zip: JACKSONVILLE FL 32205

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: CHERYL TAYLOR

MGR

04/04/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date