

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000146657

Entity Name: RZ HEALTHCARE LLC

Current Principal Place of Business:

347 WEST OAK STREET
KISSIMMEE, FL 34741

Current Mailing Address:

6929 SEA CORAL DRIVE
APT#228
ORLANDO, FL 32821 US

FEI Number: 47-1945194

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZAHID, MUHAMMAD
6929 SEA CORAL DRIVE
APT#228
ORLANDO, FL 32821 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 MGRM
Name ZAHID, MUHAMMAD
Address 6929 SEA CORAL DRIVE #228
City-State-Zip: ORLANDO FL 32821

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: ZAHID MUHAMMAD

MGRM

04/18/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date