

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000168458

**Entity Name:** MEDWORLD CONCIERGE, LLC

**Current Principal Place of Business:**

1860 MONTREAL ROAD  
TUCKER, GA 30084

**Current Mailing Address:**

1860 MONTREAL ROAD  
TUCKER, GA 30084

**FEI Number:** 47-2301355

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BARLEY, DAVID P SR  
5150 BELFORT ROAD  
BUILDING 400  
JACKSONVILLE, FL 32256 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 MANSOUR, NADIRA  
Address 1860 MONTREAL ROAD  
City-State-Zip: TUCKER GA 30084

*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:** NADIRA MANSOUR

MGR

03/27/2018

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date