

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000018560

Entity Name: REGENERX HEALTH CARE, LLC

Current Principal Place of Business:

1924 DOLPHIN BLVD. S.
SAINT PETERSBURG, FL 33707

Current Mailing Address:

1924 DOLPHIN BLVD. S.
SAINT PETERSBURG, FL 33707 US

FEI Number: 61-1754496

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEHREMFELD, CRAIG
601 BAYSHORE BLVD STE 700
TAMPA, FL 33606 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 PIAZZA, JOHN J JR
Address 1924 DOLPHIN BLVD. S.
City-State-Zip: SAINT PETERSBURG FL 33707

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: JOHN J PIAZZA JR

MANAGING MEMBER

04/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date