

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000060656

Entity Name: VIVA WELLNESS & INJURY, LLC

Current Principal Place of Business:

701 E. OAK STREET
SUITE A
KISSIMMEE, FL 34744

Current Mailing Address:

701 E. OAK STREET
SUITE A
KISSIMMEE, FL 34744 US

FEI Number: 81-2272205

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GEORGE F. INDEST III, P.A. - THE HEALTH LAW FIRM
1101 DOUGLAS AVENUE
SUITE A
ALTAMONTE SPRINGS, FL 32714 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 MED PRACTICE CONSULTANTS, LLC
Address 5703 RED BUG LAKE ROAD
SUITE 310
City-State-Zip: WINTER SPRINGS FL 32708

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: JORGE FERNANDEZ, MD

MD

01/31/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date