2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 26, 2018
Secretary of State
CC3108614536

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Entity Name: NEMATOLOGY SOLUTIONS ASSOCIATES, LLC

Current Principal Place of Business:

4643 NW 6TH STREET,
SUITE A
GAINESVILLE, FL 32609

Current Mailing Address:

2603 NW 13TH STREET, #405
GAINESVILLE, FL 32609-2835 US

FEI Number: 81-2856290

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WOOD, BRENT
2603 NW 13TH STREET, #405
GAINESVILLE, FL 32609-2835 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: BRENT WOOD 03/26/2018

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	WOOD, BRENT	Name	SEKORA, NICHOLAS
Address	2146 NW 87TH TER	Address	4702 NW 79TH ROAD
City-State-Zip:	GAINESVILLE FL 32605	City-State-Zip:	GAINESVILLE FL 32653

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: BRENT WOOD MGR 03/26/2018

Electronic Signature of Signing Authorized Person(s) Detail — Date