

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000213761

Entity Name: MADISON WELLS, PLLC

Current Principal Place of Business:

8268 US HWY 301 N
PARRISH, FL 34219

Current Mailing Address:

703 POINSETTIA AVENUE
ELLENTON, FL 34222 US

FEI Number: 37-1844177

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, THOMAS
254 BEACON HARBOUR LOOP
BRADENTON, FL 34212 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 AMBR
Name WELLS, MADISON
Address 703 POINSETTIA AVENUE
City-State-Zip: ELLENTON FL 34222

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: MADISON WELLS

MS

05/01/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date