## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000224354

Entity Name: PLUMB MEDICAL LLC

**Current Principal Place of Business:** 

8079 N VOYAGER DR CITRUS SPRINGS, FL 34433

**Current Mailing Address:** 

PO BOX 698

DUNNELLON, FL 34430 US

FEI Number: 81-4699276 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MEEKS, JAMES ERVIN 8079 N VOYAGER DR CITRUS SPRINGS, FL 34433 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: JAMES E MEEKS 03/28/2017

Electronic Signature of Registered Agent

Date

FILED Mar 28, 2017

**Secretary of State** 

CC1012002275

Authorized Person(s) Detail:

Title AMBR

Name MEEKS, JAMES

Address 8079 N VOYAGER DR

City-State-Zip: CITRUS SPRINGS FL 34433

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: JAMES MEEKS MANAGER 03/28/2017