2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000016774

Entity Name: TERRA HEALTH CARE LAB LLC

Current Principal Place of Business:

Current Finicipal Flace of t

13373 TWINWOOD LANE, APT 2319

ORLANDO, FL 32837

Current Mailing Address:

13373 TWINWOOD LANE, APT 2319 ORLANDO, FL 32837 US

FEI Number: 81-5052834 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TORTOLERO, CARLOS J 13373 TWINWOOD LANE APT 2319 ORLANDO, FL 32837 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

Authorized Person(s) Detail:

Title MGR Title MGR

Name RIVAS ALCALA, ELIO Name TORTOLERO, CARLOS J

Address 13373 TWINWOOD LANE APT 2319 Address 13373 TWINWOOD LANE APT 2319

City-State-Zip: ORLANDO FL 32837 City-State-Zip: ORLANDO FL 32837

Title MANAGER

Name FIGUEREDO DE ANTONUCCI, INGRID

С

Address 13373 TWINWOOD LN APT 2319

City-State-Zip: ORLANDO FL 32837

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: CARLOS TORTOLERO

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER

04/23/2019

Date

FILED Apr 23, 2019

Secretary of State

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