

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000113386

Entity Name: TCMMD LLC

Current Principal Place of Business:

2011 S. 25TH STREET
#206
FORT PIERCE, FL 34947

Current Mailing Address:

2011 S. 25TH STREET
#206
FORT PIERCE, FL 34947 US

FEI Number: 82-5507136

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KUYKENDALL, MATTHEW S SR.
2011 S. 25TH STREET
#206
FORT PIERCE, FL 34947 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: MATTHEW S. KUYKENDALL SR.

04/21/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR, CEO
Name KUYKENDALL, MATTHEW S SR.
Address 1159 SE PRESTON LANE
City-State-Zip: PORT SAINT LUCIE FL 34983

Title MEDICAL DIRECTOR, AUTHORIZED REPRESENTATIVE
Name CELLINI, ALDINO
Address 2011 S. 25TH STREET #206
City-State-Zip: FORT PIERCE FL 34947

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: MATTHEW KUYKENDALL

MGR

04/21/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date