

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000121369

**Entity Name:** PATTON'S MEDICAL LLC

**Current Principal Place of Business:**

3201 SOUTH BLVD  
CHARLOTTE, NC 28209

**Current Mailing Address:**

3201 SOUTH BLVD  
CHARLOTTE, NC 28209

**FEI Number:** 26-4586519

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PORTER, HANNAH  
3201 SOUTH BLVD  
CHARLOTTE, FL 28209 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:** HANNAH PORTER

04/25/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            CONTROLLER  
Name            PORTER, HANNAH  
Address        3201 SOUTH BLVD  
City-State-Zip: CHARLOTTE NC 28209

*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:** HANNAH PORTER

CONTROLLER

04/25/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date