

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000208340

Entity Name: ZOID MEDICAL, LLC

Current Principal Place of Business:

3250 BONITA BEACH RD
#205-209
BONITA SPRINGS, FL 34134

Current Mailing Address:

3250 BONITA BEACH RD
#205-209
BONITA SPRINGS, FL 34134 US

FEI Number: 82-3488252

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GAROFALO, BRIAN
3250 BONITA BEACH RD #205-209
BONITA SPRINGS, FL 34134 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	MGR	Title	SEC
Name	GAROFALO, BRIAN	Name	GAROFALO, BRIAN
Address	315 USHERS RD	Address	315 USHERS RD
City-State-Zip:	BALLSTON LAKE NY 12019	City-State-Zip:	BALLSTON LAKE NY 12019

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: BRIAN GAROFALO

MGR

04/01/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date