

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000018791

**Entity Name:** ODJ MEDICAL SOLUTIONS LLC

**Current Principal Place of Business:**

7076 GAS LINE ROAD  
KEYSTONE HEIGHTS, FL 32656

**Current Mailing Address:**

7076 GAS LINE ROAD  
KEYSTONE HEIGHTS, FL 32656

**FEI Number: 83-3411630**

**Certificate of Status Desired: Yes**

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

CAPELLAN, OTILIA  
7076 GAS LINE ROAD  
KEYSTONE HEIGHTS, FL 32656 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 AP  
Name CAPELLAN, OTILIA  
Address 7076 GAS LINE ROAD  
City-State-Zip: KEYSTONE HEIGHTS FL 32656

*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: CAPELLAN OTILIA**

**OWNER**

**01/31/2020**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date