2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 25, 2020
Secretary of State
9857209568CC

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Entity Name: MEDIPRO HEALTH LLC

Current Principal Place of Business:

581 N. PARK AVENUE
#4128
APOPKA, FL 32704

Current Mailing Address:

581 N. PARK AVENUE
#4128
APOPKA, FL 32704 US

FEI Number: 83-3811943

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ELLIOTT, CAVEL
1070 LAKE FRANCIS DRIVE
APOPKA, FL 32712 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	AMBR	Title	AMBR
Name	GONZALEZ, TAMIKA	Name	ELLIOTT, CAVEL
Address	290 E MAIN STREET, APT 308	Address	1070 LAKE FRANCIS DRIVE
City-State-Zip:	ELMSFORD NY 10523	City-State-Zip:	APOPKA FL 32712

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: TAMIKA GONZALEZ MEMBER 06/25/2020

Electronic Signature of Signing Authorized Person(s) Detail — Date