

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000184674

Entity Name: OPTIMA HEALTH SOLUTIONS, LLC

Current Principal Place of Business:

1456 E MICHIGAN STREET
ORLANDO, FL 32806

Current Mailing Address:

2236 SUMMER RAYE COURT
SAINT CLOUD, FL 34772 US

FEI Number: 27-1502602

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OLIVER, CORLIS Y MD
1456 E MICHIGAN STREET
ORLANDO, FL 32806 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: CORLIS Y OLIVER, MD

03/05/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRESIDENT & CEO
Name OLIVER, CORLIS Y MD
Address 1456 E MICHIGAN STREET
City-State-Zip: ORLANDO FL 32806

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: CORLIS Y OLIVER, MD

PRESIDENT & CEO

03/05/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date