

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000251448

Entity Name: COMPLETE MEDICARE SOLUTIONS, LLC

Current Principal Place of Business:

408 S BROAD ST
BROOKSVILLE, FL 34601

Current Mailing Address:

5400 PINEHURST DRIVE
SPRING HILL, FL 34606 US

FEI Number: 85-2943649

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRICK, SCOTT A ESQ.
1005 N MARION STREET
TAMPA, FL 33602 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
Name ROMEO, MATTHEW L
Address 5372 LEGEND HILLS LANE
City-State-Zip: SPRING HILL FL 34609

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: /S/ MATTHEW ROMEO

MANAGER

02/14/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date