

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000025524

Entity Name: NATION RX ADVOCATES LLC**Current Principal Place of Business:**902 CLINT MOORE ROAD
SUITE 124
BOCA RATON, FL 33487**Current Mailing Address:**902 CLINT MOORE ROAD
SUITE 124
BOCA RATON, FL 33487**FEI Number:** 86-1374584**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**SHATZ, SAMUEL G
902 CLINT MOORE ROAD
SUITE 124
BOCA RATON, FL 33487 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	SHATZ, HAROLD L
Address	902 CLINT MOORE ROAD SUITE 124
City-State-Zip:	BOCA RATON FL 33487

Title	MGR
Name	SHATZ, EDWARD S
Address	902 CLINT MOORE ROAD SUITE 124
City-State-Zip:	BOCA RATON FL 33487

Title	MGR
Name	ROSENBERG, SCOTT H
Address	902 CLINT MOORE ROAD SUITE 124
City-State-Zip:	BOCA RATON FL 33487

Title	MGR
Name	SHATZ, SAMUEL G
Address	902 CLINT MOORE ROAD SUITE 124
City-State-Zip:	BOCA RATON FL 33487

Title	COMPLIANCE MANAGER
Name	SPECK, SANDRA MAY
Address	902 CLINT MOORE ROAD SUITE 124
City-State-Zip:	BOCA RATON FL 33487

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: SAMUEL SHATZ**REGISTERED AGENT****01/07/2022**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date