## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000508582

Entity Name: INNOVATION MEDICAL CENTER, LLC

**Current Principal Place of Business:** 

50 NE 26TH AVE ST STE 310

POMPANO BEACH, FL 33062

## **Current Mailing Address:**

50 NW 26 AVE ST STE 310 PONPANO BEACH, FL 33062 US

FEI Number: 87-3827381 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

COUCELO ASSOCIATES, INC 1818 S AUSTRALIAN AVENUE SUITE 230 WEST PALM BEACH, FL 33409 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

FILED Mar 09, 2022

**Secretary of State** 

2749033066CC

## Authorized Person(s) Detail:

Title AMBR

Name THE TELEMEDICINE WELLNESS

CONNECTION, LLC

Address 16192 COASTAL HIGHWAY

SIGNATURE: ARNALDO COUCELO

City-State-Zip: LEWES DE 19958

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.

Electronic Signature of Signing Authorized Person(s) Detail

REGISTERED AGENT

03/09/2022

Date