## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000524226

Entity Name: HEALIX MEDICAL, LLC

**Current Principal Place of Business:** 

17510 N. US HWY 41 STE B

LUTZ. FL 33549

**Current Mailing Address:** 

17510 N. US HWY 41 STE B LUTZ. FL 33549 US

FEI Number: 87-3991354 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RUGG, JOSEPH 401 E JACKSON ST STE 3100 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

**FILED** Apr 13, 2023

**Secretary of State** 

8932680903CC

Authorized Person(s) Detail:

Title **AMBR** Title **AMBR** 

PETRILLO, NICK Name POW, KEITH Name

Address 17510 N. US HWY 41 STE B Address 17510 N. US HWY 41 STE B

City-State-Zip: LUTZ FL 33549 City-State-Zip: LUTZ FL 33549

Title **AMBR** 

Name PATEL, DEVAN

Address 17510 N. US HWY 41 STE B

City-State-Zip: LUTZ FL 33549

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.

04/13/2023 SIGNATURE: DEVAN PATEL **MEMBER**