

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000007505

**Entity Name:** MECLABS INSTITUTE LLC

**Current Principal Place of Business:**

4651 SALISBURY RD, SUITE 400  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

PO BOX 50032  
JACKSONVILLE BEACH, FL 32240 US

**FEI Number:** 26-2291806

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

MCGLAUGHLIN, FLINT D  
4651 SALISBURY RD, SUITE 400  
JACKSONVILLE, FL 32256 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:** FLINT MCGLAUGHLIN

03/16/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MCGLAUGHLIN, FLINT D  
Address 4651 SALISBURY RD, SUITE 400  
City-State-Zip: JACKSONVILLE FL 32256

*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:** FLINT MCGLAUGHLIN

CEO

03/16/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date