## **2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M17000009615

Entity Name: VALINTRY HEALTH, LLC

**Current Principal Place of Business:** 

1201 S ORLANDO AVE STE 440 WINTER PARK. FL 32789

**Current Mailing Address:** 

1201 S ORLANDO AVE STE 440 WINTER PARK, FL 32789 US

FEI Number: 81-2589288 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOWMAN, WILLIAM R JR, ESQ SHUFFIELD, LOWMAN &WILSON PA 100 LEGION PLACE STE 1700 ORLANDO, FL 32801 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 Feb 24, 2020

**Secretary of State** 

5946375555CC

Authorized Person(s) Detail:

Title MGR Title MGR

Name DIXON, DARYL Name PARRIS, JOSEPH

Address 1201 S ORLANDO AVE STE 440 Address 1201 S ORLANDO AVE STE 440

City-State-Zip: WINTER PARK FL 32789 City-State-Zip: WINTER PARK FL 32789

Title MGR

Name RUPEIKIS, TIMMY

Address 1201 S ORLANDO AVE STE 440

City-State-Zip: WINTER PARK FL 32789

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: DARYL DIXON CEO