## **2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M19000002030

Entity Name: ALEXANDER INFUSION, LLC

**Current Principal Place of Business:** 

500 W MAIN ST

LOUISVILLE, KY 40202

**Current Mailing Address:** 

500 W MAIN ST

LOUISVILLE. KY 40202 US

FEI Number: 11-3391115 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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 29, 2021

**Secretary of State** 

6277784352CC

## Authorized Person(s) Detail:

Title AUTHORIZED MEMBER
Name EAGLE NY RX, LLC
Address 500 W MAIN ST

City-State-Zip: LOUISVILLE KY 40202

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: HANK ROBINSON SVP, TAX 04/29/2021