## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000013178

Entity Name: AMERICAN MOBILE DERMATOLOGY, LLC

**FILED** Apr 10, 2014 **Secretary of State** CC4564421388

**Current Principal Place of Business:** 

1054 GATEWAY BLVD. SUITE 110

BOYNTON BEACH, FL 33426

## **Current Mailing Address:**

1054 GATEWAY BLVD SUITE 110 BOYNTON BEACH, FL 33426 US

FEI Number: 90-0067619 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MAHARREY, JENNIFER 1054 GATEWAY BLVD. SUITE 110 BOYNTON BEACH, FL 33426 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

Authorized Person(s) Detail:

Title MGRM Title **MGRM** 

MAHARREY, JENNIFER Name Name DEVOURSNEY, JAMES 1054 GATEWAY BLVD 1054 GATEWAY BLVD Address Address

**STE 110 STE 110** 

City-State-Zip: BOYNTON BEACH FL 33426 City-State-Zip: BOYNTON BEACH FL 33426

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.