

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000049455

Entity Name: CLINIQUE LA PRAIRIE, LLC

Current Principal Place of Business:

245 NE 37 STREET
MIAMI, FL 33137

Current Mailing Address:

245 NE 37 STREET
MIAMI, FL 33137 US

FEI Number: 33-1089769

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLEITAS, PLLC
OCEAN BANK BUILDING
782 NW LE JEUNE RD #430
MIAMI, FL 33126 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 MGR
Name MATTLI-OPPENHEIM, ILONA MARION
Address 245 NE 37 STREET
City-State-Zip: MIAMI FL 33137

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: ILONA MARION MATTLI-OPPENHEIM

MGR

02/26/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date