

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000127447

Entity Name: ADVANCED ORTHOPEDICS & PAIN MANAGEMENT, P.L.

Current Principal Place of Business:

3355 BURNS RD
SUITE 304
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

3355 BURNS RD
SUITE 304
PALM BEACH GARDENS, FL 33410 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LECHTNER, NEAL
1985 S. OCEAN DRIVE
GL-2
HALLANDALE, FL 33009 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: NEAL LECHTNER

04/24/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name SKEET CONWELL LLC
Address 3355 BURNS RD
SUITE 304
City-State-Zip: PALM BEACH GARDENS FL 33410

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: NEAL LECHTNER

AGENT

04/24/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date