

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000020055

Entity Name: SJE EMERGENCY MEDICINE, PL

Current Principal Place of Business:

C/O STRANG ADAMS PA
1130 WASHINGTON AVENUE THIRD FLOOR
MIAMI BEACH, FL 33139

Current Mailing Address:

C/O STRANG ADAMS PA
1130 WASHINGTON AVENUE THIRD FLOOR
MIAMI BEACH, FL 33139 US

FEI Number: 26-2133043

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STRANG ADAMS PA
1130 WASHINGTON AVENUE
SUITE 306 THIRD FLOOR
MIAMI BEACH, FL 33139 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: MAX A ADAMS ESQ

01/26/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name ELETTO, SARAH
Address C/O STRANG ADAMS PA
1130 WASHINGTON AVENUE THIRD
FLOOR
City-State-Zip: MIAMI BEACH FL 33139

Title MBR
Name STRANG, JODI L
Address C/O STRANG ADAMS PA
1130 WASHINGTON AVENUE THIRD
FLOOR
City-State-Zip: MIAMI BEACH FL 33139

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: SARAH ELETTO

AUTHORIZED MEMBER

01/26/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date