

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000023041

Entity Name: ANTHONY SOLAGES AND INFECTIOUS DISEASE ASSOCIATES, LLC.

**FILED
Mar 21, 2015
Secretary of State
CC7824912082**

Current Principal Place of Business:

4745 SW 148TH AVE
SUITE 301
DAVIE, FL 33330

Current Mailing Address:

PO BOX 292523
DAVIE, FL 33329 US

FEI Number: 26-4216161

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SOLAGES, ANTHONY
4745 SW 148TH AVE
SUITE 301
DAVIE, FL 33330 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 SOLAGES, ANTHONY
Address PO BOX 292523
City-State-Zip: DAVIE FL 33329

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: ANTHONY SOLAGES

PRESIDENT

03/21/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date