

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000037796

Entity Name: DESTIN SURGERY CENTER, LLC

Current Principal Place of Business:

4485 FURLING LANE
DESTIN, FL 32541

Current Mailing Address:

14201 DALLAS PARKWAY
DALLAS, TX 75254 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 MANAGING MEMBER
Name USP DESTIN, INC.
Address 14201 DALLAS PARKWAY
City-State-Zip: DALLAS TX 75254

Title PRESIDENT
Name BRODNAX, BRETT
Address 14201 DALLAS PARKWAY
City-State-Zip: DALLAS TX 75254

Title SECRETARY
Name JAMES, BOWDEN
Address 14201 DALLAS PARKWAY
City-State-Zip: DALLAS TX 75254

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: ALISAL BAKER

AUTHORIZED AGENT

06/15/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date