## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000103415

Entity Name: PHYSICIANS GROUP ALLIANCE, LLC

**Current Principal Place of Business:** 

8700 W FLAGLER STREET SUITE 280 MIAMI, FL 33174

## **Current Mailing Address:**

8700 W FLAGLER STREET SUITE 280 MIAMI, FL 33174 US

FEI Number: 27-3577824 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

COLLINS, STANTON K 8700 W FLAGLER STREET SUITE 280

MIAMI, FL 33174 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: STANTON K COLLINS 03/27/2020

> Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

**MANAGER** Title

COLLINS, STATON K Name

8700 W FLAFLER STREET Address

SIGNATURE: STATON K COLLINS

SUITE 280

City-State-Zip: MIAMI FL 33174

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.

Electronic Signature of Signing Authorized Person(s) Detail

03/27/2020 CEO, PRESIDENT

**FILED** Mar 27, 2020

**Secretary of State** 

3614479605CC

Date