

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000006166

Entity Name: GREGORY D. LEWEN MD, PLLC

Current Principal Place of Business:

20803 BISCAYNE BLVD., UNIT #110
AVENTURA, FL 33180

Current Mailing Address:

20803 BISCAYNE BLVD., UNIT #110
AVENTURA, FL 33180 US

FEI Number: 27-4554510

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEWEN, GREGORY D
20803 BISCAYNE BLVD.
SUITE 110
AVENTURA, FL 33180 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 MGRM
Name LEWEN, GREGORY D
Address 3250 NE 1ST AVE, #1011
City-State-Zip: MIAMI FL 33137

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: GREGORY D. LEWEN

OWNER

01/09/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date