

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000119244

Entity Name: SHAH DERMATOLOGY LLC**Current Principal Place of Business:**8438 DIAMOND COVE CIRCLE
ORLANDO, FL 32836**Current Mailing Address:**8438 DIAMOND COVE CIRCLE
ORLANDO, FL 32836**FEI Number:** 45-3636575**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**SHAH, AYYAZ M
8438 DIAMOND COVE CIRCLE
ORLANDO, FL 32836 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:** AYYAZ SHAH

06/29/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGRM
Name	SHAH, AYYAZ M
Address	8438 DIAMOND COVE CIRCLE
City-State-Zip:	ORLANDO FL 32836

Title	MGR
Name	SHAH, HUMAIRA
Address	8438 DIAMOND COVE CIRCLE
City-State-Zip:	ORLANDO FL 32836

Title	ADMINISTRATOR
Name	SHAH, ANGEL
Address	8438 DIAMOND COVE CIRCLE
City-State-Zip:	ORLANDO FL 32836

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: HUMAIRA SHAH

MGR

06/29/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date