

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000026445

**Entity Name:** BLINSKI PLASTIC SURGERY, LLC

**Current Principal Place of Business:**

6330 MANOR LANE  
SUITE 100  
S. MIAMI, FL 33143

**Current Mailing Address:**

6330 MANOR LANE  
SUITE 100  
S. MIAMI, FL 33143

**FEI Number:** 45-4667705

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SCHIMMEL, ROBERT L  
1221 BRICKELL AVENUE  
SUITE 770  
MIAMI, FL 33131 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 BLINSKI, MD, DARRYL J  
Address 6330 MANOR LANE, SUITE 100  
City-State-Zip: S. MIAMI FL 33143

*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:** DARRYL BLINSKI,MD

PA

04/23/2018

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date