

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000061105

Entity Name: HARRIS MEDICAL, LLC

Current Principal Place of Business:

9307 SE OLYMPUS STREET
HOBE SOUND, FL 33455

Current Mailing Address:

P.O. BOX 844
HOBE SOUND, FL 33475 US

FEI Number: 36-4738240

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARRIS, ROBERT MJR
20632 WEST GOLDEN ELM DRIVE
ESTERO, FL 33928 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 HARRIS, ROBERT MJR
Address P.O. BOX 844
City-State-Zip: HOBE SOUND FL 33475

Title MGRM
Name HARRIS, SHARI MAGEN
Address P.O. BOX 844
City-State-Zip: HOBE SOUND FL 33475

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: ROBERT HARRIS

MGRM

02/26/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date