

2018 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L12000061985

Entity Name: PULIDO INTERNAL MEDICINE, LLC

Current Principal Place of Business:

700 ZEAGLER DRIVE SUITE 1
PALATKA, FL 32177

Current Mailing Address:

700 ZEAGLER DRIVE SUITE 1
PALATKA, FL 32177

FEI Number: 45-5269184

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PULIDO, ALEX M DR.
700 ZEAGLER DR
SUITE 1
PALATKA, FL 32217 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: ALEX M PULIDO

01/25/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title CEO
Name PULIDO, ALEX MD
Address 700 ZEAGLER DR
SUITE 1
City-State-Zip: PALATKA FL 32177

Title CO-OWNER
Name PULIDO, GABRIELA
Address 700 ZEAGLER DRIVE SUITE 1
City-State-Zip: PALATKA FL 32177

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: GABRIELA PULIDO

CO-OWNER

01/25/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date