

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000099105

Entity Name: RIVERSIDE ENDOSCOPY CENTER LLC

Current Principal Place of Business:

2151 RIVERSIDE AVE
JACKSONVILLE, FL 32204

Current Mailing Address:

2151 RIVERSIDE AVE
JACKSONVILLE, FL 32204 US

FEI Number: 46-1567697

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HELLER, DAN P ESQ
2701 PONCE DE LEON BLVD
STE 301
CORAL GABLES, FL 33134 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 MANAGER
Name AKA INVESTMENTS, LLC
Address 2151 RIVERSIDE AVE
City-State-Zip: JACKSONVILLE FL 32204

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: ABDI ABBASSI

OWNER

03/09/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date