696 S. YON				
ORMOND B	EACH, FL 32174 US			
FEI Number: 27-4570956		Certificate of Status Desired: No		
Name and Address of Current Registered Agent:				
JOHNSON, DIA 1100 N. PENIN				
INE VV SIVITRINA	BEACH, FL 32109 05			
The above name	d entity submits this statement for the purpose of changing its re	egistered office or regis	tered agent, or both, in the State of Flo	orida.
	d entity submits this statement for the purpose of changing its re E: DIANE JOHNSON	egistered office or regis	tered agent, or both, in the State of Flo	orida. 01/23/2019
		egistered office or regis	tered agent, or both, in the State of Flo	
SIGNATURE	E: DIANE JOHNSON	egistered office or regis	tered agent, or both, in the State of Flo	01/23/2019
SIGNATURE	E: DIANE JOHNSON Electronic Signature of Registered Agent	egistered office or regis	tered agent, or both, in the State of Flo	01/23/2019
SIGNATURE	DIANE JOHNSON Electronic Signature of Registered Agent Person(s) Detail :			01/23/2019
SIGNATURE Authorized	Electronic Signature of Registered Agent Person(s) Detail : MGR	Title	MGRM	01/23/2019

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: DIANE JOHNSON

OWNER

01/23/2019

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L13000027047

Entity Name: ANIMAL EMERGENCY HOSPITAL VOLUSIA LLC

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

696 S. YONGE STREET ORMOND BEACH, FL 32174

Current Mailing Address:

FILED Jan 23, 2019 Secretary of State 1133825234CC

Date