

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000082415

Entity Name: DR. HEALY, LLC

Current Principal Place of Business:

2901 W SWANN AVENUE
DEPARTMENT OF EMERGENCY MEDICINE
TAMPA, FL 33609

Current Mailing Address:

2901 W SWANN AVENUE
DEPARTMENT OF EMERGENCY MEDICINE
TAMPA, FL 33609 US

FEI Number: 46-2954451

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOSS LAW
9887 4TH STREET NORTH
STE 202
ST PETERSBURG, FL 33702 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 MGR
Name HEALY, NICHOLAS N
Address 2901 W SWANN AVENUE
DEPARTMENT OF EMERGENCY
MEDICINE
City-State-Zip: TAMPA FL 33609

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: NICHOLAS HEALY, DO

MANAGER

02/26/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date