## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000088321

Entity Name: SPIRIPHYSICAL, LLC

15212 FOREST LANE

**Current Principal Place of Business:** 

LOXAHATCHEE. FL 33470

## **Current Mailing Address:**

PO BOX 703 15673 SOUTHERN BLVD #107-164 LOXAHATCHEE, FL 33470 US

FEI Number: 30-0742550 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

15212 FOREST LANE LOXAHATCHEE, FL 33470 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

**FILED** Mar 16, 2020

**Secretary of State** 

0298366137CC

## Authorized Person(s) Detail:

Title MANAGER

Name BRUCE, BALTZ

Address 15673 SOUTHERN BLVD

15673 SOUTHERN BLVD #107-164

City-State-Zip: LOXAHATCHEE FL 33470

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.

**OWNER** 03/16/2020 SIGNATURE: BRUCE BALTZ

Electronic Signature of Signing Authorized Person(s) Detail

Date