

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000178064

**Entity Name:** BPPAIN, LLC

**Current Principal Place of Business:**

600 CLEVELAND STREET  
710  
CLEARWATER, 33755

**Current Mailing Address:**

600 CLEVELAND STREET  
710  
CLEARWATER, 33755 AF

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MEINCK, BRADLEY  
600 CLEVELAND STREET  
SUITE 710  
CLEARWATER, FL 33755 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:** BRADLEY MEINCK

01/30/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name PANAGAKOS FAMILY LIMITED LIABILITY COMPANY  
Address 3530 SHORELINE CIRCLE  
City-State-Zip: PALM HARBOR FL 34684

Title MGRM  
Name SPINEPAIN ASC, LLC  
Address P.O. BOX 2376  
City-State-Zip: CLEARWATER FL 33757

*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:** MEINCK, BRADLEY

**REGISTERED AGENT**

01/30/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date