

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000066423

**Entity Name:** PINECREST ANIMAL MEDICAL CENTER L.L.C.

**Current Principal Place of Business:**

12586 SW 88TH STREET  
MIAMI, FL 33186

**Current Mailing Address:**

12586 SW 88TH STREET  
MIAMI, FL 33328 US

**FEI Number:** 46-5705571

**Certificate of Status Desired:** No

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

OGC ASSOCIATES PA  
3275 W. HILLSBORO BLVD  
306  
DEERFIELD BEACH, FL 33442 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:** ODIJAS CAMINHA

03/10/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	VALDES, ANNE	Name	VIOTTI, CHRIS
Address	12586 SW 88TH STREET	Address	10526 SW 52ND ST
City-State-Zip:	MIAMI FL 33186	City-State-Zip:	COOPER CITY FL 33328

*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:** VIOTTI, CHRIS

MGR

03/10/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date