

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000154030

Entity Name: ARMELLE G. CLEOPHAT , PHD, ARNP-BC, PLLC

Current Principal Place of Business:

10120 SW 45TH AVE
OCALA, FL 34476

Current Mailing Address:

21840 SW 1ST STREET
DUNNELLON , FL 34431 US

FEI Number: 47-1989736

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLEOPHAT, ARMELLE G PHD
21840 SW 1ST STREET
DUNNELLON , FL 34431 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: ARMELLE G CLEOPHAT

03/05/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name CLEOPHAT, ARMELLE G PHD
Address 21840 SW 1ST STREET
City-State-Zip: DUNNELLON FL 34431

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: ARMELLE G CLEOPHAT

OWNER

03/05/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date