

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000164529

Entity Name: DIGITAL HEALTH SURGICAL, LLC

Current Principal Place of Business:

7858 SW 187 TERR.
CUTLER BAY, FL 33157

Current Mailing Address:

7858 SW 187 TERR.
CUTLER BAY, FL 33157

FEI Number: 47-2197156

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 AMBR
Name PIERCE, JAY
Address 7858 SW 187 TERR.
City-State-Zip: CUTLER BAY FL 33157

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: JAY PIERCE

MANAGING PARTNER

03/06/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date