## 2015 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: Yes

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

FILED Apr 23, 2015

**Secretary of State** 

CC3634471753

## 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 04/23/2015