

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000181938

Entity Name: BLZ HEALTHCARE LLC

Current Principal Place of Business:

4974 SW 34TH TERRACE
FT. LAUDERDALE, FL 33312

Current Mailing Address:

4974 SW 34TH TERRACE
FT. LAUDERDALE, FL 33312

FEI Number: 47-2423725

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZALKIN, SHARON
4974 SW 34TH TERRACE
FT LAUDERDALE, FL 33312 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: SHARON ZALKIN

02/23/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name ZALKIN, BRITTANY
Address 4974 SW 34TH TERRACE
City-State-Zip: FT. LAUDERDALE FL 33312

Title AMBR
Name ZALKIN, SHARON
Address 4974 SW 34TH TERRACE
City-State-Zip: FT. LAUDERDALE FL 33312

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: BRITTANY J. ZALKIN

OWNER

02/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date