

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000047953

**Entity Name:** AGELESS RX SURGICAL PARTNERS, LLC

**Current Principal Place of Business:**

600 HERATIGE DR  
SUITE 105  
JUPITER, FL 33458

**Current Mailing Address:**

224 CHIMNEY CORNER LN  
SUITE 1002  
JUPITER, FL 33458

**FEI Number:** 47-3431225

**Certificate of Status Desired:** No

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

GOLDBERG, DANA M  
224 CHIMNEY CORNER LN  
SUITE1002  
JUPITER, FL 33458 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 MGR  
Name GOLDBERG, DANA M  
Address 224 CHIMNEY CORNER LN SUITE  
1002  
City-State-Zip: JUPITER FL 33458

Title MGR  
Name OSBORN, BRETT A  
Address 600 HERATIGE DR SUITE 105  
City-State-Zip: JUPITER FL 33458

*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:** BRETT A OSBORN

**MANAGING PARTNER**

**01/15/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date