

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000071128

Entity Name: HELIX HEARING CARE (FLORIDA) PARTNERSHIP, LLC

Current Principal Place of Business:

1101 BRICKELL AVE STE N1700
MIAMI, FL 33131

Current Mailing Address:

1101 BRICKELL AVE STE N1700
MIAMI, FL 33131 US

FEI Number: 47-4663194

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KLAPPER, JON H. ESQ.
1101 BRICKELL AVE STE N1700
MIAMI, FL 33131 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: JON H. KLAPPER

04/24/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER, PRESIDENT, CEO
Name REKLING, JAN-PETER
Address 1101 BRICKELL AVE STE N1700
City-State-Zip: MIAMI FL 33131

Title SECRETARY
Name KLAPPER, JON H ESQ.
Address 1101 BRICKELL AVE STE N1700
City-State-Zip: MIAMI FL 33131

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: JON H. KLAPPER

SECRETARY

04/24/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date