

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000122182

Entity Name: MAXIMILIANO VELASCO. MD. LLC

Current Principal Place of Business:

10095 SW 88TH STREET,
SUITE 103
MIAMI, FL 33176

Current Mailing Address:

PO BOX 430885
MIAMI, FL 33243-0885 US

FEI Number: 26-1179038

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VELASCO, MAXIMILIANO MD
10095 SW 88TH STREET,
SUITE 103
MIAMI, FL 33176 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 VELASCO, MAXIMILIANO MD
Address 10095 SW 88TH STREET,
SUITE 103
City-State-Zip: MIAMI FL 33176

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: MAXIMILIANO VELASCO, MD

MANAGER

04/16/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date