

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000175270

Entity Name: HEAR MORE MEDICAL CENTERS OF AMERICA, LLC

Current Principal Place of Business:

11834 CR 101 SUITE 202
THE VILLAGES, FL 32162

Current Mailing Address:

PO BOX 5164
OCALA, FL 34478 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOORE, MICHAEL
11834 CR 101 SUITE 202
THE VILLAGES, FL 32162 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 OWNER
Name MOORE, MICHAEL D
Address PO BOX 5164
City-State-Zip: Ocala FL 34478

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: MICHAEL MOORE

MGR MEMBER

02/18/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date