

2021 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L15000196179

Entity Name: ALDOR - PULMONARY, LLC

Current Principal Place of Business:

17 DAVIS BLVD.
SUITE 401
TAMPA, FL 33606

Current Mailing Address:

P.O. BOX 10891
TAMPA, FL 33679 US

FEI Number: 81-0779466

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DORA, FURMAN V.
17 DAVIS BLVD.
SUITE 401
TAMPA, FL 33606 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: DORA FURMAN

06/09/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name ALDOR HOLDINGS, LLC
Address 3500 W TACON ST.
City-State-Zip: TAMPA FL 33629

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: DORA V. FURMAN

MEMBER

06/09/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date