#### **2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000197975

**Entity Name: VETA HEALTH LLC** 

FILED
Jul 01, 2020
Secretary of State
2555718356CC

### **Current Principal Place of Business:**

ATTN: ADAM ZWECKER/ AKERMAN LLP 98 SE SEVENTH STREET STE 1100

MIAMI, FL 33131

## **Current Mailing Address:**

ATTN: ADAM ZWECKER, AKERMAN LLP 98 SE SEVENTH STREET SUITE 1100 MIAMI, FL 33131 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: TANVI V. ABBHI 07/01/2020

Electronic Signature of Registered Agent

Date

#### Authorized Person(s) Detail:

Title AMBR

Name VATTIKUTI ABBHI, TANVI

Address 1300 BRICKELL BAY DRIVE, APT. 2902

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: TANVI VATTIKUTI ABBHI

MEMBER

07/01/2020

Date