## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000047128

Entity Name: 3J'S HEALTHCARE GROUP LLC

**Current Principal Place of Business:** 

6826 NW 77 CT MIAMI, FL 33166

**Current Mailing Address:** 

6826 NW 77 CT MIAMI, FL 33166 US

FEI Number: 81-1762357 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LASTRA, WILSON 10928 NW 69 ST DORAL, FL 33178 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

**FILED** Feb 11, 2017

**Secretary of State** 

CC6468271693

Authorized Person(s) Detail:

Title MGR Title MGR

LASTRA, WILSON Name SALAS, ONELYMAR Name Address 10928 NW 69 ST Address 10928 NW 69 ST City-State-Zip: DORAL FL 33178 City-State-Zip: DORAL FL 33178

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.

**MGR** 

Electronic Signature of Signing Authorized Person(s) Detail