

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000075854

Entity Name: SOUTH FLORIDA DURABLE MEDICAL EQUIPMENT, LLC

Current Principal Place of Business:

2410 SW 87TH AVENUE
MIRAMAR, FL 33025

Current Mailing Address:

2410 SW 87TH AVENUE
MIRAMAR, FL 33025

FEI Number: 81-2706138

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, ANDELL K
1801 NE 123 STREET
SUITE 409
MIAMI, FL 33181 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 AP
Name BELLEH, OWEI Z
Address 1801 NE 123 STREET
City-State-Zip: MIAMI FL 33181

Title AMBR
Name MILLS, NADEJE A
Address 2410 SW 87TH AVENUE
City-State-Zip: MIRAMAR FL 33025

Title AMBR
Name MILLS, SEAN F
Address 2410 SW 87TH AVENUE
City-State-Zip: MIRAMAR FL 33025

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: NADEJE MILLS

OWNER

07/02/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date