

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000124536

Entity Name: SHAHID MD L.L.C

Current Principal Place of Business:

7901 REFLECTION COVE DR, APT 104
FORT MYERS, FL 33907

Current Mailing Address:

7901 REFLECTION COVE DR, APT 104
FORT MYERS, FL 33907 US

FEI Number: 81-3355733

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHAHID, MUHAMMAD WASEEM
7901 REFLECTION COVE DR
APT 104
FORT MYERS, FL 33907 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: MUHAMMAD W SHAHID

01/31/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name SHAHID, MUHAMMAD WASEEM
Address 7901 REFLECTION COVE DR
APT 104
City-State-Zip: FORT MYERS FL 33907

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: MUHAMMAD WASEEM SHAHID

MD

01/31/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date